

Mission

In partnership with our community, we provide, purchase, and coordinate a wide range of high-quality prevention, intervention, and protective services in response to public need and mandates. We are committed to making the best and most cost-effective use of resources available to promote health, self-sufficiency, and an improved quality of life. We honor the dignity of individuals and families in all of our work.

Financial Summary

	2002 Actual	2003 Adopted Budget	2003 Estimate	2004 Budget	Change from 2003 Adopted Budget	
					\$	%
Human Services (a)						
Expenditures	\$32,028,671	\$32,836,224	\$33,098,170	\$33,842,749	\$1,006,525	3.07%
Revenues (b)	\$21,435,819	\$21,589,309	\$22,308,303	\$22,149,629	\$560,320	2.60%
Tax Levy	\$10,592,852	\$11,246,915	\$10,789,867	\$11,693,120	\$446,205	3.97%
Long Term Care						
Expenditures	\$27,387,436	\$28,829,651	\$29,565,529	\$31,207,896	\$2,378,245	8.25%
Revenues	\$26,085,371	\$27,021,136	\$28,065,486	\$29,408,135	\$2,386,999	8.83%
Tax Levy	\$1,302,065	\$1,808,515	\$1,500,043	\$1,799,761	(\$8,754)	-0.48%
Mental Health Cntr						
Expenditures	\$4,001,559	\$4,210,610	\$4,289,092	\$4,482,996	\$272,386	6.47%
Revenues (c)	\$1,900,845	\$2,250,600	\$1,992,000	\$2,134,000	(\$116,600)	-5.18%
Tax Levy	\$2,100,714	\$1,960,010	\$2,297,092	\$2,348,996	\$388,986	19.85%
Public Health						
Expenditures	\$2,677,147	\$2,863,507	\$2,604,012	\$3,016,774	\$153,267	5.35%
Revenues	\$934,055	\$875,244	\$867,627	\$994,934	\$119,690	13.68%
Tax Levy	\$1,743,092	\$1,988,263	\$1,736,385	\$2,021,840	\$33,577	1.69%
Total All Funds						
Expenditures	\$66,094,813	\$68,739,992	\$69,556,803	\$72,550,415	\$3,810,423	5.54%
Revenues	\$50,356,090	\$51,736,289	\$53,233,416	\$54,686,698	\$2,950,409	5.70%
Tax Levy	\$15,738,723	\$17,003,703	\$16,323,387	\$17,863,717	\$860,014	5.06%

(a) Human Services Fund includes the Criminal Justice Collaborating Council (CJCC). The 2004 CJCC budget includes expenditures of \$308,613, revenues of \$17,770 and tax levy of \$290,913, a \$100,000 increase in tax levy from the 2003 budget.

(b) Human Services Fund includes fund balance of \$398,546 in the 2003 budget and \$556,050 in the 2004 budget.

(c) Mental Health Center Fund includes fund balance of \$50,000 in 2004.

Position Summary (FTE)

Regular Positions	373.34	371.53	371.53	372.27	0.74
Extra Help	16.17	12.72	12.72	11.41	(1.31)
Overtime	2.41	2.31	2.31	2.28	(0.03)
Total	391.92	386.56	386.56	385.96	(0.60)

Human Services Health & Human Services Fund Purpose/ Summary

Fund Purpose

This fund provides for County Administration of human service programs funded under state consolidated aids. This includes services to families in which child abuse/neglect, delinquency, and/or serious family dysfunction exists. Also included are placement and placement support services for the Children's Center, group home, institutions, and foster homes. Services to the mentally ill/chronically mentally ill individual who is drug or alcohol dependent are also provided. Administrative support services are provided to coordinate service delivery.

Financial Summary

	2002 Actual	2003 Adopted Budget	2003 Estimate (a)	2004 Budget	Change from 2003 Adopted Budget	
					\$	%
Health & Human Services Fund (b)						
Personnel Costs	\$15,267,226	\$16,134,319	\$16,088,989	\$17,016,939	\$882,620	5.5%
Operating Expenses	\$15,562,124	\$15,385,072	\$15,718,621	\$15,382,020	(\$3,052)	0.0%
Interdept. Charges	\$1,184,713	\$1,316,833	\$1,290,560	\$1,443,790	\$126,957	9.6%
Fixed Assets	\$14,608	\$0	\$0	\$0	\$0	N/A
Total Expenditures	\$32,028,671	\$32,836,224	\$33,098,170	\$33,842,749	\$1,006,525	3.1%
General Government	\$17,468,821	\$17,037,876	\$17,531,271	\$17,294,938	\$257,062	1.5%
Fine/Licenses	\$441,889	\$450,000	\$450,000	\$450,000	\$0	0.0%
Charges for Services	\$1,830,473	\$2,103,244	\$2,189,231	\$2,265,000	\$161,756	7.7%
Interdepartmental	\$36,917	\$39,543	\$39,543	\$31,497	(\$8,046)	-20.3%
Other Revenue (c)	\$1,657,719	\$1,958,646	\$2,098,258	\$2,108,194	\$149,548	7.6%
Total Revenues	\$21,435,819	\$21,589,309	\$22,308,303	\$22,149,629	\$560,320	2.6%
Tax Levy (d)	\$10,592,852	\$11,246,915	\$10,789,867	\$11,693,120	\$446,205	4.0%

Position Summary (FTE)

Regular Positions	262.68	261.87	261.87	263.37	1.50
Extra Help	7.28	5.73	5.73	5.59	(0.14)
Overtime	1.82	1.72	1.72	1.72	0.00
Total	272.78	269.32	269.32	270.68	1.36

- (a) The 2003 estimate exceeds 2003 adopted budget, the Department anticipates the need to process an ordinance in the 4th quarter to appropriate additional revenue and expenditure authority.
- (b) Includes Criminal Justice Collaborating Council (CJCC), CJCC 2004 budget includes expenditures of \$308,613, revenues of \$17,770 and tax levy of \$290,913, a \$100,000 increase in tax levy from the 2003 budget.
- (c) Other revenues include fund balance of \$398,546 in 2003 and \$556,050 in 2004.
- (d) The adopted levy for 2002 was \$10,470,268. The amount shown for 2002 is actual expenditures less actual revenue.

Departmental Objectives**Administrative Services Division**

1. Restructure the outpatient clinic reception area in order to fully implement the new tasks involved in the accounts receivable/scheduling system and to be HIPAA compliant. (1st Quarter 2004, Critical Issue #3)
2. Continue the negotiations with State of Wisconsin on the implementation of the Wisconsin Statewide Automated Child Welfare Information System (WiSACWIS). (2nd Quarter 2004, Critical Issue #3)
3. Complete development of the departmental Intranet website as an internal resource for staff. Expect to complete by the end of the 3rd quarter 2004. (Critical Issue #3)
4. Prepare for the implementation of case management and associated systems along with interfaces to PeopleLink. (4th Quarter 2004, Critical Issue #3)

Intake and Support Services Division

1. Evaluate the costs and benefits of continuing services at the Workforce Development Center and review with the Health and Human Services Committee prior to expending funds for relocation or remodeling of the Human Services Center (3rd Quarter 2004) (Critical Issue #2).
2. Criteria and procedures will be developed to implement a waiting list for the BASIC non-medical program. Although there is reason to believe that the 2003 elimination of the medical program will reduce non-medical applications, a two year trend of increasing applicants and cost trends indicate need for a wait list contingency plan to reduce likelihood of budget overruns. (1st Quarter 2004) (Critical Issue #2)
3. Within available County resources and capabilities, division staff will participate in planning, training, and implementation activities to prepare for WiSACWIS (Wisconsin State Automated Child Welfare information Systems) participation in June 2004, which will track child protective services and children in placement. Participation in this stand alone State of Wisconsin information system is mandated under Wisconsin Statute 46.03(7)(g). (2nd Quarter 2004) (Critical Issue #3)
4. Division Intake and Access staff will work with Corporation Counsel and appropriate state personnel to develop appropriate child protective procedures and protocol in response to the recent Appeals Court decisions which respectively narrow the timelines to file petitions in juvenile court, and which limit child protective services workers' rights to interview children in private settings without parental approval and consent. (1st Quarter 2004, Critical Issue #1)
5. Appropriate equipment will be acquired, and select Access staff will begin to pilot the videotaping of children suspected to be victims of sexual abuse in appropriate situations. This is intended to help minimize the number of interviews for children while enhancing receipt of appropriate treatment and the prosecution of perpetrators. (2nd Quarter 2004, Critical Issue #1)
6. Assure division-wide practice compliance with the requirements of the Adoption and Safe Families Act. (2nd Quarter 2004) (Critical Issue #1 Goal 1.10)

Clinical Services Division

1. Increase community residential options for the chronic and persistent mentally ill adult to ensure successful community reintegration and avoid decompensation and the need for increased high cost restrictive placement. (2nd Quarter 2004, Critical Issue #1)
2. Provide for the implementation of the automated Avatar Practice Management System throughout the division. (2nd Quarter 2004, Critical Issue #3)
3. Provide for an alternative treatment program to the Winnebago Institute Gemini program, which is more cost effective, and community based. (2nd Quarter 2004, Critical Issue #1)
4. Continue to augment services to clients who utilize the division's medication program through the use of increased drug sampling, use of co-pays, medical assistance application support, and pharmaceutical card benefits. (2nd Quarter 2004, Critical Issue #1)
5. Increase AODA halfway house programming to offset the need to use institute days and to address the increased need for halfway house treatment post inpatient and residential care.

Children and Family Services Division

1. Provide targeted services to youth who are transitioning to adulthood and who have been in alternate care for at least six months. (4th quarter 2003) (Critical Issue #1)
2. Complete implementation of the child welfare training needs assessment to target training and improve staff effectiveness. (4th quarter 2003) (Critical Issue #1)
3. In coordination with other County and State staff, and within available County resources and capabilities, continue the design and implementation of the Wisconsin Statewide Child Welfare Information System (WiSACWIS) as mandated by Wisconsin Statute. (2nd Quarter 2004) (Critical Issue #3)
4. Use the recommendations from the state's formal program review of the Birth to Three Program to implement continuous quality improvement for this program. (2nd Quarter 2004) (Critical Issue #1)
5. Provide pre-service training for newly recruited foster parents. Evaluate the ability and benefit of providing pre-service training to all existing foster parents. (2nd Quarter 2004) (Critical Issue #1)
6. Assure division-wide practice compliance with the requirements of the Adoption and Safe Families Act. (2nd Quarter 2004) (Critical Issue #1 Goal 1.10)

Adolescent and Family Division

1. In cooperation with the Criminal Justice Collaborating Council, arrange county-wide Restorative Justice training through the Center for Restorative Justice. Training to be directed to both juvenile and criminal justice professionals and county leaders, in order to provide a broad understanding of Restorative Justice principles, policy implications and potential for the positive impact of Restorative Justice initiatives on the justice system and community. (1st Quarter 2004) (Critical Issue #1 Goal 1.1)
2. Provide mental health training for childcare staff and supervisors at the Juvenile Center. Regular, on-going training for juvenile center staff concerning child mental health disorders, diagnoses, treatment and intervention strategies, will improve the level of care of a resident population that is presenting increasingly challenging emotional and behavioral problems. Training will better equip staff to understand and effectively engage and care for these youths while residents of the center. (4th Quarter 2004) (Critical Issue #1)
3. Assure division-wide practice compliance with the requirements of the Adoption and Safe Families Act. (2nd Quarter 2004) (Critical Issue #1 Goal 1.10)
4. In cooperation with Safe & Sound, a community-based anti-crime initiative, the District Attorney's office and Juvenile Court, implement after school report center programming for juvenile offenders. Services are contingent upon grant funding sources for which Safe & Sound has applied. Programming will promote competency development during after school hours and provide structure and accountability for participants during that time. (3rd Quarter 2004) (Critical Issue #1 Goal 1.3)

Criminal Justice Collaborating Council

1. Implement and evaluate the pretrial screening program to provide current offender information to justice partners and help manage jail population. (Critical Issue #1, 2nd quarter 2004)
2. Establish an intervention program for operating after revocation and worthless check offenses to minimize jail days and reduce workload in the Courts and District Attorney's Office. (Critical Issue #2 and #3, 2nd quarter 2004)
3. Complete the transfer of court data to a data warehouse to allow for the creation of data queries and reports to provide system information to justice partners. (Critical Issue #4, 1st quarter 2004)
4. Examine Jail and Huber populations to better identify programming needs. (Critical Issue #5, 1st quarter 2004)

Human Services	Health & Human Services	Objectives/ Achievements
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5. Establish Criminal Justice Collaborating Council administrative policies and procedures related to the supervision of staff, budget development and the administration of services. (Critical Issue #6, 1st quarter)
6. Experience a jail return rate of no more than 40% for individuals receiving Community Transition Program case management services. The Community Transition Program will provide IV drug prevention information to all clients served who are found to be at high risk for IV drug usage (Critical Issue #7, 2nd quarter)
7. Research and evaluate substance abuse treatment court initiatives through site visits funded by the Bureau of Justice Assistance. (Critical Issue #8, 4th quarter 2004)
8. Map CJCC related programming to identify outcome measures. (Critical Issue #9, 2nd quarter)
9. Explore alternatives to incarceration including day reporting programs, electronic monitoring and other appropriate interventions for possible implementation. (Critical Issue #10, 3rd quarter)
10. Evaluate options for diverting 1st offender domestic violence cases to provide alternatives to incarceration. (Critical Issue #11, 1st quarter)
11. Research available cognitive and restorative restructuring programs to evaluate their potential impact. (Critical Issue #12, 4th quarter 2004)
12. Create a database of community service agencies and site information to streamline Community Service Options program efficiency and maximize resources. (Critical Issue #13, 3rd quarter 2004).

Major Departmental Strategic Achievements from 7/01/02 to 6/30/03

Administrative Services Division

1. Purchased and began implementation of a department wide accounts receivable system and interface to PeopleLink. (Critical Issue #3)
2. Implemented privacy rule of Health Insurance Portability and Accountability Act (HIPAA), which became effective April 2003. (Critical Issue #3)
3. Began the implementation of the electronic transaction rule of HIPAA, which will become effective October 2003. (Critical Issue #3)
4. Completed development of the departmental presence on the county's web site. (Critical Issue #3)

Intake and Support Services Division

1. Division Economic Support Staff significantly reduced the food stamp error rate from 32% the previous year to 0% this past year. The potential Agency preventable sanction rate during this period was \$93 for every \$1 issued in error.
2. Without additional administrative funds or personnel, Division Economic Support staff implemented the State of Wisconsin's new Family Planning Waiver (Medicaid) Program which has added about 300 additional unduplicated cases to caseloads which had already risen 71% in the previous 4 years.
3. Division staff planned and implemented the downsizing of the BASIC (Basic Assistance Serving Individuals in Crisis) general relief program through the elimination of the medical payment component for temporary incapacitated and uninsured adults. The BASIC medical program was funded with \$330,000 of county tax levy.
4. Customer feedback sampling in the Access Units was increased to 20%, and a database was developed to tally responses and provide inquiry/report capacity at individual and unit levels.
5. In the latest reporting period, Access Unit staff effected a child re-maltreatment (recidivism) rate of 4% in the 12 months following investigation – exceeding the less stringent federal/state standard of ≤ 5% in 6 months.

Clinical Services Division

1. Increased community residential options for the chronic and persistent mentally ill adult to ensure successful community reintegration and avoid decompensation and the need for increased high cost restrictive placement. (4th quarter 2002) (Critical Issue #2)
2. Provided for computerization upgrade within the outpatient mental health system (PeopleLink) to increase efficiency, and increased capability to monitor services and clients moving through the system. (4th quarter 2002) (Critical Issue #3)
3. Provided additional support to clients who utilize the division's medication program through assistance in applications for card pharmaceutical benefits, medical assistance programs, senior care, free drug programs, etc. (4th quarter 2002) (Critical Issue #1)
4. Monitored and analyzed the outcomes of the jail transition program to determine its impact on jail recidivism and community reintegration. (4th quarter 2002) (Critical Issue #1)

Children and Family Services Division

1. Youth transitioning into adulthood from out of home care (at least six (6) months) were provided a variety of services including independent living services and support, housing assistance, mentoring services, adult educational services, and referrals to community resources. Child Welfare staff referred youth for adult services (mental health and long-term care) and coordinated the transition with agency staff.
2. Supervisors utilized the ITNA (Individual Training Needs Assessment) to develop the 2002 individual goals in each social worker's annual performance evaluation. In addition, the CORE training courses offered by the Southern Child Welfare Training Partnership were incorporated as a requirement for a social worker to be promoted from a social worker I to social worker II.
3. Staff have participated in WiSACWIS – Program Activity Workshop (PAW) meetings regarding the design and implementation of the Wisconsin Statewide Child Welfare Information System (WiSACWIS).
4. A Programs in Partnership Plan (PIP) was developed and signed between representatives of the State of Wisconsin, Lutheran Social Services (LSS) and the department to implement changes recommended in the State's formal review of Birth to Three. Program changes have been initiated and services are being provided in natural environments as required by State guidelines.
5. Pre-service training for new and experienced foster parents (P.A.C.E. "Partners in Alternate Care Education) was provided. In collaboration with Ozaukee and Washington County three (3) training sessions were scheduled. One (1) P.A.C.E. training session was facilitated by Ozaukee and Washington County and the other two (2) were provided by Waukesha County. A summary of the training evaluations included a rating score between very good and excellent.

Adolescent and Family Services Division

1. Outcome measures for divisional contracted programs have been established. Performance outcomes have been incorporated into annual purchase of service agreements between the Department and contract vendors, measuring individual program objectives, tying program performance to contracting. (1st quarter 2003) (Critical Issue #1)
2. Original security cameras, monitors and intercom system equipment in the Juvenile Center have been replaced to ensure a high level of staff and resident safety and assure continuing efficiency of Juvenile Center operations. (1st quarter 2003) (Critical Issue #1)
3. In partnership with the Mediation Center of Waukesha, mediation training for Department social work staff has been provided. Mediation strategies augment effective social work intervention with families in conflict and sustain services that maintain a low out of home placement rate. (1st quarter 2003) (Critical Issue #1)

Human Services Health & Human Services Achievements/ Capital Projects

Criminal Justice Collaborating Council

1. Through funding from National Institute of Corrections members of the CJCC viewed first hand the programs in place at the Hamilton County Community Corrections Board.
2. Developed the CJCC and a mission, vision, and strategic plan.
3. Established a six committee and three-subcommittee structure.
4. The Criminal Justice Collaborating Council and committee structure were formed and the Council and committees are meeting regularly.
5. Issued a Request for Proposal (RFP) for a pretrial screening provider to perform systematic screening of new justice system admissions for purposes of identifying potential for diversion.
6. Hired a CJCC Coordinator to provide administrative assistance and research and analysis skills to the Council, Chair, and working committees.
7. Worked with County Information Systems to integrate District Attorney and Sheriff's data into a data warehouse to allow for the extraction and analysis of criminal justice system data.
8. Completed a strategic plan with CJCC members and key staff. Revised the mission, vision, and identified action items to guide the Council through the next year.
9. Achieved a 61% increase in the number of community service hours performed by Huber inmates who participated in the Community Service Options Program, which reduced Huber crowding.
10. The Community Transition Program reduced jail recidivism from 70-75% (national general jail population estimates) to 38% for those participating in ongoing case management.

Current and Proposed Capital Projects

Proj. #	Project Name	Expected Completion Year	Total Project Cost	Est. % Complete End of 03	Estimated Operating Impact	A=Annual T= One-Time
200109	HHS Automated System	2005	\$1,285,000	50%	\$176,750	A

Refer to Capital Project section of the budget book for additional detail.

Project is coordinated by Department of Administration; annual ongoing costs include software and licensing costs.

Human Services Health & Human Services Fund

Program

Administrative Services

Program Description

Administrative Services is responsible for coordinating and providing operational, fiscal and management information systems support for the Department. The processing of client and provider payments and the billing for services to Medicare, medical assistance, insurance and responsible parties are major functions. Department wide data collection, accumulation and dissemination efforts are coordinated and supported through this area. The major state funding source for Fund 150, the Basic County Allocation (BCA), is accounted for in this program area. Within the guidelines of the State of Wisconsin Allowable Cost Policy Manual, the BCA can be used to fund a broad range of services, as it is not earmarked for any single purpose or program.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Properly submitted and authorized invoices are paid within 30 days of receipt or designated due date (Std 90%)	99.5%	90%	99.93%	90%	0%
Staffing FTE	46.21	44.96	44.96	47.27	2.31

Personnel Costs	\$2,340,924	\$2,461,536	\$2,521,151	\$2,630,578	\$169,042
Operating Expenses	\$114,173	\$152,655	\$165,645	\$168,203	\$15,548
Interdept. Charges	\$591,115	\$643,029	\$633,171	\$700,892	\$57,863
Total Expenditures	\$3,046,212	\$3,257,220	\$3,319,967	\$3,499,673	\$242,453
General Government	\$7,123,579	\$7,093,398	\$7,161,728	\$7,246,728	\$153,330
Charges for Services	\$3,249	\$3,500	\$3,500	\$4,000	\$500
Interdepartmental	\$36,917	\$39,543	\$39,543	\$31,497	(\$8,046)
Other Revenue	\$325,637	\$713,546	\$713,546	\$713,550	\$4
Total Revenues	\$7,489,382	\$7,849,987	\$7,918,317	\$7,995,775	\$145,788
Tax Levy	(\$4,443,170)	(\$4,592,767)	(\$4,598,350)	(\$4,496,102)	\$96,665



Program Highlights

In 2003 the State of Wisconsin began a new time allocation system, the Random Moment Time Study, to document Staff effort. The results are used to more accurately allocate administration and overhead costs to federal, state and local programs. Staff performing administrative functions are to be assigned 100% to a cost center and not be split. As a result of this new program, personnel costs reflect the transfer of the following staff:

- 0.05 FTE Deputy Director from Economic Services Administration and Support
- 0.90 FTE Clerk Typist from Economic Services Administration and Support
- 1.00 FTE Account Clerk I from the Long Term Care Fund
- 0.50 FTE Account Clerk II from the Mental Health Center or Fund

Personnel costs also reflect a net reduction of 0.14 FTE of Temporary Extra Help as well as general wage and health insurance increases.

Most of the increases in operating expenses are related to information systems for software, licenses and supplies. Operating expenses also include the amount of \$4,830 to contract with an outside vendor for the shredding of confidential client documents in response to the Health Insurance Portability and Accountability Act privacy and security regulations.

Interdepartmental charges reflect the reallocation of collection services in the amount of \$43,365, End User Technology Fund (EUTF) charges increase \$12,087 and other general increases.

General Government revenues increase \$100,000 from the results of a new funding source called the Community-Based Medical Assistance Claim (CBMAC) that enables community based providers to recover federal funds for Medicaid Administrative Activities performed by agency staff based on the results of the Random Moment Time Study and a decrease of BCA of \$6,670. BCA is budgeted at \$11.4 million department-wide and has not increased in the past eight years. The lack of an increase in BCA is a significant driver in Health and Human Services tax levy need.

Interdepartmental revenue reflects a decrease of \$8,046 from the Public Health Division indirect costs reimbursement.

Human Services Health & Human Services Fund

Program

Intake and Shared Services

Program Description

Serves as the primary initial contact point for non-clinical service referrals. Assessments provided in the areas of child and adult protection services, truancy and delinquency, physical custody requests, out of home placement, parent/teen family dysfunction, and information/referral service. Short-term and supportive service includes Kinship Care assessment/funding, childcare certification, crisis respite child day care, home and financial management services and volunteer services. The Division's purchased services emphasize prevention and early intervention.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
12 month child abuse/neglect re-referral rate Standard = ≤ 10%	4%	9%	6%	8%	(1%)
12 month child abuse/neglect maltreatment recurrence Standard = ≤ 5%	2%	5%	3%	5%	-
24 month child abuse/neglect re-referral rate Standard = ≤ 20%	10.7%	15%	12%	15%	-
24-month child abuse/neglect maltreatment recurrence Standard = ≤ 10%	5.4%	8%	7%	8%	-
Child Day Care Certification Decisions within 60 days Standard = 95%	90%	95%	95%	95%	
Volunteer Transportation Request Fulfillment Standard = 80%	94%	90%	95%	90%	-

Staffing (FTE)	32.24	31.80	31.80	31.80	0.00
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Personnel Costs	\$1,824,151	\$1,908,013	\$1,864,942	\$1,992,172	\$84,159
Operating Expenses	\$1,508,777	\$1,559,286	\$1,482,788	\$1,359,154	(\$200,132)
Interdept. Charges	\$32,003	\$49,641	\$50,344	\$61,503	\$11,862
Total Expenditures:	\$3,364,931	\$3,516,940	\$3,398,074	\$3,412,829	(\$104,111)
General Government	\$1,223,834	\$1,208,053	\$1,191,417	\$1,013,270	(\$194,783)
Other Revenue	\$4,181	\$4,500	\$4,500	\$4,500	\$0
Total Revenues:	\$1,228,015	\$1,212,553	\$1,195,917	\$1,017,770	(\$194,783)
Tax Levy	\$2,136,916	\$2,304,387	\$2,202,157	\$2,395,059	\$90,672



Program Highlights

Personnel Costs increase reflect general wage and health insurance increases. Operating Expenses decrease primarily reflects a \$192,300 decrease in childcare initiatives funded through State of Wisconsin Community Childcare Initiatives Grant dollars and decreased crisis respite child care costs of \$25,000, partially offset by provider contract increases which generally ranged from 0-3%. Interdepartmental Charges increase reflects increased computer maintenance charges.

General Government Revenue decrease includes a \$6,609 decrease in the State Kinship Care placement allocation, as well as \$192,300 decrease in the State of Wisconsin Community Child Care Initiatives Grant, and an increase of \$5,500 of State Child Care Administration revenue.

Human Services Health & Human Services Fund

Program

Intake and Shared Services (cont.)



Activities	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Access # of Referrals	8,351	8,100	8,600	8,900	800
Child Abuse/Neglect Assessments	776	810	780	810	-
Juvenile Custody Intake Contacts	1,154	1,300	1,150	1,150	(150)
Juvenile Court Intake Referrals	1,070	1,250	1,150	1,150	(100)
Home & Financial Management Cases	84	90	85	85	(5)
Kinship Care Assessments	150	138	157	160	22
Kinship Care Funded Placements (Avg. Monthly)	146	141	146	152	11
Kinship Care Waiting List	0	15	28	20	5
Crisis Intervention: Adult Protective /Mental Health	571	600	600	600	-
Crisis Intervention: Child Protective /Health Welfare	517	350	520	520	170
Crisis Respite Child Day Care (Children)	116	120	127	130	10
Family Day Care: # Certified Homes	90	90	90	90	-
Volunteer Transportation: # of one-way trips	3,057	4,500	3,500	3,500	(1,000)
Volunteer Transportation: Miles Driven	94,705	102,000	100,000	100,000	(2,000)

Economic Services Administration and Support

Program Description

Administers a variety of Economic Support (ES) programs including Medical Assistance, Food Stamps, Child Care, Non-Medical BASIC (Basic Assistance for Individuals in Crisis), a fraud elimination program, a regional Economic Support Specialist Trainer, and the Low-Income Energy Assistance Program. Service is provided either directly or through purchase of service contract. ES services for adults, elderly, and disabled are provided at the Human Services Center while ES services for families with children are provided at the Workforce Development Center (WDC).



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Economic Support Programs Eligibility decisions within 30 days (Standard 90%)	84%	85%	80%	80%	(5%)
Achieve Food Stamp error rate below State averages					
State error rate:	12.3%	10.5%	11%	11%	.5%
Waukesha County:	0%	10.4%	11%	11%	.6%

Human Services Fund

Health & Human Services

Program

Economic Services Administration and Support (cont.)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	41.64	41.64	41.64	40.69	(0.95)
Personnel Costs	\$1,829,989	\$1,993,110	\$1,938,835	\$2,076,026	\$82,916
Operating Expenses	\$1,540,860	\$1,402,190	\$1,256,983	\$971,056	(\$431,134)
Interdept. Charges	\$84,663	\$89,271	\$89,156	\$115,813	\$26,542
Total Expenditures:	\$3,455,512	\$3,484,571	\$3,284,974	\$3,162,895	(\$321,676)
General Government	\$2,892,976	\$2,805,975	\$3,097,876	\$2,921,824	\$115,849
Charges for Services	\$104,484	\$126,042	\$149,400	\$50,000	(\$76,042)
Other Revenue (a)	\$210,565	\$206,100	\$216,212	\$246,500	\$40,400
Total Revenues:	\$3,208,025	\$3,138,117	\$3,463,488	\$3,218,324	\$80,207
Tax Levy	\$247,487	\$346,454	(\$178,514)	(\$55,429)	(\$401,883)

(a) The 2004 budget includes \$187,500 in Human Services Fund Balance (prior year tax levy).



Program Highlights

The Economic Services Administration and Support expenses and revenues reflect various programmatic and budgetary changes resulting from the State's return of all child and family related Medical Assistance (MA) and Food Stamp (FS) responsibilities to counties two years ago, and recent State of Wisconsin budget actions which will decrease Waukesha County's base Income Maintenance (IM) allocation by 11% or \$156,000, as well as a significant reduction (estimated at 40% or \$1.5 million) to contracted W2 provider (Affiliated Computer Services-ACS) revenues. Although Waukesha County is not the W2 service provider, the cut in W2 funding to the state contractor (ACS) is significant, as they've previously funded a number of HHS Department operational costs at the Workforce Development Center (WDC), which they will be unable to continue in 2004. These actions occur at a time when WDC based caseloads are growing at an unprecedented rate.

Personnel Costs increase reflect general wage and health insurance cost increases and redistribution of 0.95 FTE agency support staff previously charged to this program to the HHS Administrative program area. Operating Expenses decrease reflect a reduction of the Wisconsin Home Energy Assistance Program of \$20,000; reductions of \$570,000 related to elimination of the non-mandated BASIC medical program; and discontinued reimbursements to funeral providers for indigent adults of \$30,000. Offsetting these reductions are higher costs related to the resumption of department funding for WDC operational expenses including contracted clerical and pre-screener services at \$73,000; net-rent related expenses of \$30,158; and various supplies and other equipment at \$37,000. Operating expenses also include \$90,000 for potential renovation and relocation costs to move WDC based ESS staff back to the 3rd floor of the Human Services Center. The County Board amended the budget to require the Health and Human Services Department to evaluate the costs and benefits of continuing services at the Workforce Development Center and review the analysis with the Health and Human Services Committee prior to expending funds for relocation or remodeling of the Human Services Center.

Interdepartmental Charges increase reflect increased computer maintenance charges of \$13,586 and WDC based ESS copying and postage costs of \$16,500 previously covered by the W2 provider (ACS), partially offset by various telephone and computer replacement charge decreases.

General Government revenue includes increased revenues of \$257,085 claimed under the 50/50 addendum to the State IM contract, and increased Childcare Administration reimbursement of \$101,300. Offsetting these increases are decreases to state funding for the Wisconsin Home Energy Assistance Program of \$30,800, and the loss of state general relief reimbursement of \$146,000 due to the 2003 elimination of the BASIC medical program. Charges for Services revenue decrease \$76,000 reflecting the contracted W2 provider's (ACS) reduction in the level of childcare eligibility determinations purchased from the County.

Economic Services Administration and Support (cont.)

Other Revenue includes one-time use of \$187,500 of Health and Human Services fund balance (prior year tax levy), which consists of \$92,500 provided to pay for a portion of rent and expenses previously funded by the contract W2 agency (ACS); \$50,000 is budgeted to minimize service disruptions related to a \$156,000 reduction in State Income Maintenance funding; and \$45,000 is budgeted to provide for one-half of the \$90,000 estimated remodeling and relocation expenses to move County WDC back to the Health and Human Services Center in 2005, if necessary. Other Revenue also reflects the discontinued use of fund balance to fund prior year medical claims of \$30,000 and the reduction of BASIC program recoupments of \$116,000, both related to the discontinuation of the (non-mandated) BASIC medical program.



Activity

Human Services Center Caseload Data

	<u>2002 Actual</u>	<u>2003 Budget</u>	<u>2003 Estimate</u>	<u>2004 Budget</u>	<u>Budget Change</u>
Average monthly unduplicated caseload	2,987	3,200	3,100	3,200	-
Medical Assistance average monthly cases	3,030	3,150	3,100	3,200	50
Food Stamps average monthly cases	596	620	650	700	80

Basic General Relief

Average monthly cases	93	60	100	60	-
Non-medical needs average cases	63	50	85	60	10
Non-medical needs average monthly grant	240	275	265	265	(10)



Activity

**Workforce Development Center
Caseload Data**

	<u>2002 Actual</u>	<u>2003 Budget</u>	<u>2003 Estimate</u>	<u>2004 Budget</u>	<u>Budget Change</u>
Average Monthly Unduplicated Caseload	3,256	3,500	4,300	5,100	1,600
Average Monthly Caseload/Worker	217	233	280	340	107
Medical Assistance Average Monthly Cases	3,900	4,100	4,200	4,550	450
Food Stamps Average Monthly Cases	747	720	790	830	110
W-2 Child Care Average Monthly Cases	745	860	830	870	10
Annual Child Care Benefits	\$6,514,132	\$6,500,000	\$6,800,000	\$7,100,000	\$600,000

Birth to Three

Program Description

The Birth to Three program is a joint County/LSS program which provides early intervention services to parents with children from birth to age three with special needs who demonstrate at least 25% delay in one or more areas of development or have a diagnosed condition which will likely result in developmental delays. Examples include Down syndrome, autism, spina bifida, and cerebral palsy.



Performance Measures	Standard	2002 Actual	2003 Budget	2003 Estimate.	2004 Budget	Budget Change
% of parents who report their child has shown an improvement in overall functioning	95%	97%	95%	95%	95%	-
% of families who report an increase in their ability to care for and promote their child's development (effective services)	85%	95%	85%	95%	95%	10%

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	0.00	0.00	0.00	0.00	0.00
Operating Expenses	\$688,342	\$761,341	\$810,709	\$778,000	\$16,659
Total Expenditures:	\$688,342	\$761,341	\$810,709	\$778,000	\$16,659
General Government	\$437,159	\$602,676	\$602,676	\$602,676	\$0
Total Revenues:	\$437,159	\$602,676	\$602,676	\$602,676	\$0
Tax Levy (a)	\$251,183	\$158,665	\$208,033	\$175,324	\$16,659

(a) The Maintenance of Effort involved with the Birth to Three program is \$277,600. The tax levy above reflects direct program operations. The balance of support exists within the Administrative Services Program for associated overhead and supervisory support.



Program Highlights

The 2004 budget continues the transition to providing services in natural environments which includes providing training to B-3 staff, developing Interventionist Teams and providing speech therapy using the parent trainer and providing the Hanen Model.



Activity

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Total # children enrolled on Dec. 1st	429	415	459	491	76
Overall family satisfaction w/program	98%	95%	95%	95%	-
Total # children served	829	964	905	986	22

Child and Family Services

Program Description

Provides ongoing intervention to families with a child who has been abused or neglected or is at risk of abuse or neglect in order to promote the goals of child safety and keeping families together.



Performance Measures	Goal	2002 Actual	2003 Budget	2003 Estimate	2004 Budget
% of families whose risk level at assessment was intensive or high who reduce their risk at time of closure	80%	100%	80%	85%	N/A*
% of families whose needs are assessed as high at time of initial assessment who experience a reduction at time of case closure	60%	80%	70%	75%	N/A*
% of the families responding that the intervention helped their family and that they reached their goals	80%	100%	95%	95%	95%
% of families who document an increased ability to deal with the presenting problem at time of case closure	85%	100%	90%	90%	90%

*Not applicable because NCCD/CRC will no longer be used for on-going child welfare services

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	10.16	10.16	10.16	11.16	1.00
Personnel Costs	\$613,022	\$653,622	\$638,141	\$757,907	\$104,285
Operating Expenses	\$365,484	\$399,915	\$398,370	\$400,546	\$631
Interdept. Charges	\$576	\$16,271	\$16,271	\$18,737	\$2,466
Total Expenditures:	\$979,082	\$1,069,808	\$1,052,782	\$1,177,190	\$107,382
General Government	\$3,000	\$3,000	\$3,000	\$3,000	\$0
Other Revenue	\$50	\$0	\$0	\$0	\$0
Total Revenues:	\$3,050	\$3,000	\$3,000	\$3,000	\$0
Tax Levy	\$976,032	\$1,066,808	\$1,049,782	\$1,174,190	\$107,382



Program Highlights

Personnel costs reflect general wage and health insurance increases. Personnel costs also reflect an increase of \$80,942 associated with the creation of a 1.00 FTE Human Services Supervisor position. Increased position costs are mostly offset through the abolishment of a 1.00 FTE Social Worker Position previously budgeted in 2003 within the Juvenile Court Program. The position change results in a net expenditure increase of \$19,435. The social worker position is abolished, and a supervisor position created, to respond to the increase in supervisory monitoring required and to supervise a child protection unit.

The NCCD/CRC (National Council on Crime and Delinquency – Children's Research Center) structured decision making model for on-going child protection and placement cases will be discontinued. The Wisconsin Model will replace NCCD/CRC for on-going child protection and placement cases with pre-implement startup 11/01/03 and implementation 6/04. Operating expenses reflect a decrease in the purchase of services contract for sexual abuse assessments of \$4,955 and an increase in parent support services of \$4,398. Interdepartmental charges reflect an increase in computer maintenance cost under total cost of ownership.

Human Services Health & Human Services Fund

Program

Child and Family Services (cont.)



Activity

	2002 <u>Actual</u>	2003 <u>Budget</u>	2003 <u>Estimate</u>	2004 <u>Budget</u>	Budget <u>Change</u>
Total # Families Served	148	165	155	160	(5)
Number of new cases, voluntary or court					
Voluntary	37	48	42	45	(3)
Court Action	36	43	37	39	(4)

Parent Services/Alternate Care

Program Description

Provides services to children and families to prevent imminent placements, reunify families or establish an alternate permanent plan. Alternate Care placements include foster homes, group homes, residential care centers (formerly known as child caring institutions) and supervised independent living settings. Placement prevention services provide an alternative to costly placements. Services to parents help prepare for family reunification or for termination of parental rights and adoption.



Performance Measures

	Goal	2002 Actual	2003 Budget	2003 Estimate	2004 Budget
% of youths in alternate care age 13 and older at time of discharge from placement who have demonstrated progress in meeting their primary treatment goals	80%	77%	85%	80%	80%
% of children age 12 and under who were discharged during the year who have achieved the permanency plan goal before or within 18 months of the plan being ordered by Juvenile Court	70%	79%	80%	80%	80%

Rank among urban counties* in Wisconsin for placements per thousand children (based on the most recent state statistics).**

Lowest
1

2002 Actual: Lowest 1

*Brown, Dane, Kenosha, Racine, Rock, Waukesha

**U.S. Census Bureau 2000 census population and 2001 and 2002 estimates

**Out of home care caseload count including Kinship Care, (point in time) for December 2002 and 2001 from HSRS and WiSACWIS (State Report).

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	20.15	19.15	19.15	19.15	0.00

Personnel Costs	\$1,192,575	\$1,219,881	\$1,211,813	\$1,295,699	\$75,818
Operating Expenses	\$3,618,016	\$3,608,348	\$3,708,476	\$3,670,960	\$62,612
Interdept. Charges	\$78,178	\$55,489	\$55,639	\$84,273	\$28,784
Total Expenditures:	\$4,888,769	\$4,883,718	\$4,975,928	\$5,050,932	\$167,214
General Government	\$1,008,958	\$873,969	\$872,629	\$915,805	\$41,836
Charges for Services	\$441,565	\$508,000	\$438,200	\$555,000	\$47,000
Other Revenue	\$100	\$0	\$0	\$0	\$0
Total Revenues:	\$1,450,623	\$1,381,969	\$1,310,829	\$1,470,805	\$88,836
Tax Levy	\$3,438,146	\$3,501,749	\$3,665,099	\$3,580,127	\$78,378

Program Highlights

Personnel costs reflect general wage and health insurance increases.

Operating expenses reflect a \$73,920 reduction in alternatives to placement, a \$68,968 reduction in Community Integration Placements (CIP), a \$20,159 reduction in permanency planning reviews and a \$6,777 reduction in parent mentoring. Operating reductions are offset by a Residential Care Center placement increase of \$151,019 and a \$74,925 increase in foster care services primarily consisting of a \$66,695 increase in treatment foster care and therapy services.



Human Services Health & Human Services Fund

Program

Parent Services/Alternate Care (cont.)

Interdepartmental charges increase \$26,000 for legal services reflecting the availability of additional Federal IV-E revenue fund expanded child placement legal services. The remaining interdepartmental increase reflects computer maintenance cost under total cost of ownership.

General Governmental revenues reflect an increase in Youth Aids-AODA of \$58,380 due to the entire grant being earned in the Children and Family Services Division rather than in the Clinical Services Division, the aforementioned \$26,000 increase in Federal IV-E revenue associated with expanded legal services and an increase in the Youth in Independent Living Allocation of \$3,005. These increase are partially offset by a reduction in Community Integration Funding of \$45,549 (CIP). Charges for services reflect an increase in foster care and Residential Care Center client fees.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Total children in foster care	109	126	136	130	4
Days of Care	24,437	22,840	22,374	22,052	(788)
Total children in group homes	16	21	17	20	(1)
Days of Care	1,774	2,176	2,185	2,125	(51)
Total children in Residential Care Centers	36	36	39	46	10
Days of Care	5,035	4,521	5,436	5,328	807
Terminations of parental rights	11	10	11	13	3

Adolescent and Family Services

Program Description

Provides court ordered supervision and treatment to juveniles and children in need of protection and services. Services to these children and their families are directed at maintaining the children in their own homes and communities. Services include regularly scheduled family and individual meetings; collaboration with schools and academic programs; monitoring compliance with court orders and school attendance; conflict resolution; case coordination and group counseling. School-based community day treatment is provided through a contract.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Percentage of Juveniles served requiring out of home placement in residential care centers, group homes and foster care.	1.5%	1.6%	2.0%	2.0%	0.4%

Staffing (FTE)	19.90	19.56	19.56	19.56	0.00
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Personnel Costs	\$1,156,336	\$1,268,447	\$1,188,112	\$1,316,107	\$47,660
Operating Expenses	\$167,673	\$170,585	\$170,570	\$178,492	\$7,907
Interdept. Charges	\$81,861	\$19,787	\$19,787	\$23,609	\$3,822
Total Expenditures:	\$1,405,870	\$1,458,819	\$1,378,469	\$1,518,208	\$59,389
General Government	\$29,938	\$646,684	\$646,684	\$646,684	\$0
Total Revenues:	\$29,938	\$646,684	\$646,684	\$646,684	\$0
Tax Levy	\$1,375,932	\$812,135	\$731,785	\$871,524	\$59,389

Program Highlights

Personnel costs increase reflecting general wage and health insurance increases. Operating expenses increase owing to a cost to continue contract increase for the Community Day Treatment Program, a community based program serving children at highest risk for out of home placement in long term hospital or residential care settings. Interdepartmental charges increase due to greater computer maintenance charges.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of families served	509	482	530	530	48



Human Services Health & Human Services Fund

Program

Juvenile Court Services

Program Description

Provide court ordered supervision and treatment to delinquent juveniles and juveniles in need of protection and services in order to reduce delinquency recidivism, divert youths from unnecessary placement, and promote family and public safety. Services include regularly scheduled family and individual meetings; collaboration with schools and academic programs; monitoring compliance with court orders; crisis intervention; case coordination and group counseling. Contracted services include two intensive in-home treatment teams; educational support program; restitution program; structured activities program; intensive tracking and electronic monitoring; home detention program; community service sanction program and victim-offender mediation.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
% of juveniles completing court ordered supervision without committing further law violations	78.7%	78%	80%	80%	2%
% of juveniles served requiring out of home placement in residential care centers, group homes and foster care	2.4%	1.8%	2%	2%	.2%
Staffing (FTE)	20.69	20.51	20.51	19.51	(1.00)
Personnel Costs	\$1,212,999	\$1,290,221	\$1,274,000	\$1,291,822	\$1,601
Operating Expenses	\$1,483,294	\$1,478,330	\$1,466,423	\$1,477,743	(\$587)
Interdept. Charges	\$4,670	\$47,139	\$45,288	\$51,407	\$4,268
Total Expenditures:	\$2,700,963	\$2,815,690	\$2,785,711	\$2,820,972	\$5,282
General Government	\$3,684,545	\$2,655,154	\$2,871,660	\$2,861,910	\$206,756
Charges for Services	\$55,829	\$80,000	\$56,500	\$60,000	(\$20,000)
Total Revenues:	\$3,740,374	\$2,735,154	\$2,928,160	\$2,921,910	\$186,756
Tax Levy	(\$1,039,411)	\$80,536	(\$142,449)	(\$100,938)	(\$181,474)



Program Highlights

Personnel costs in this program area increase \$1,601. This net increase is the result of a general wage increase offset by the abolishment of 1.0 FTE work position. The position abolishment provides base funding for the creation of a Human Services Supervisor position within the Child and Family Services Division in response to increased workload demand in that area.

Operating expenses decrease owing to a reduction in grant funding earmarked for accountability-based contract programs. This loss of funding was mitigated to some extent, by a modest cost to continue contract increase for other juvenile justice programs. Interdepartmental charges increase due to greater computer maintenance charges. Charges for services revenues decrease reflecting a reduction in delinquency supervision and correctional cases and attendant fees. General government and total revenue increases owing to a projected reduction in correctional institutional costs. This increase in revenue, along with the reduction in personnel costs and flat operating expense has resulted in a significant reduction in tax levy funding in this program area.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of juveniles served	569	550	500	500	(50)
Average daily population of juveniles in State correctional institutions	1.1	8.1	4.2	4.4	(3.7)
State charges for correctional institution placement	\$71,227	\$481,130	\$235,897	\$277,396	(\$203,734)
State charges for Aftercare/other		\$15,464	\$25,972	\$15,982	\$518
Total State Charges	\$71,227	\$496,594	\$261,869	\$293,378	(\$203,216)

Human Services Health & Human Services Fund

Program

Juvenile Center

Program Description

Provides 24-hour care and supervision to delinquent and status offender juveniles who are court-ordered to be held in detention at the Juvenile Center. Non-secure detention (Shelter Care) has 18 beds and secure detention has a total of 18 beds. On grounds schooling is provided as well as daily structured activities. Nursing and physician services are provided through contracts.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
% compliance with licensing codes	100%	100%	100%	100%	-
Staffing (FTE)	30.11	30.11	30.11	30.11	0.00

Personnel Costs	\$1,418,675	\$1,498,387	\$1,508,731	\$1,597,795	\$99,408
Operating Expenses	\$90,449	\$93,368	\$101,232	\$100,020	\$6,652
Interdept. Charges	\$52,594	\$52,395	\$50,472	\$46,794	(\$5,601)
Fixed Assets	\$14,608	\$0	\$0	\$0	\$0
Total Expenditures:	\$1,576,326	\$1,644,150	\$1,660,435	\$1,744,609	\$100,459
General Government	\$53,883	\$67,701	\$63,401	\$62,301	(\$5,400)
Charges for Services	\$151,153	\$164,375	\$186,000	\$176,000	\$11,625
Total Revenues:	\$205,036	\$232,076	\$249,401	\$238,301	\$6,225
Tax Levy	\$1,371,290	\$1,412,074	\$1,411,034	\$1,506,308	\$94,234



Program Highlights

Personnel costs increase reflecting general wage and health insurance cost increases.

Operating costs are greater resulting from an increase in food service expense related to a projected increase in resident child care days, and a cost to continue contract increase in order to maintain adequate nursing and physician services for center residents. Interdepartmental charges decrease due to a reduction in collection service charges.

General government revenue decreases reflecting lower federal funding for meal expenses. Charges for service increase \$11,625 due to a \$25,000 increase in client fees, which result from the increase in child care days, being partially offset by a \$13,375 decrease in out of county placement revenues.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Shelter Care					
# of child care days	2,940	3,520	3,935	3,935	415
Average daily population	8.1	9.6	10.6	10.6	1.0
Secure Detention					
# of child care days	2,182	2,376	2,816	2,816	440
Average daily population	6.0	6.5	7.5	7.5	1.0
Other County Placements					
# of child care days	131	150	50	50	(100)

Mental Health Outpatient and Support Services

Program Description

The Clinical Services Division operates a comprehensive outpatient mental health clinic offering a variety of innovative programs as well as more traditional clinic services. Contract services complement County provided programs ranging from inpatient care, work related services, outpatient social/recreational services, prevention, education, and intervention (24 hour crisis phone service) to adult foster home, group homes, and residential care. Keeping clients in the community is the goal. Day Services and the Community Support Programs (CSP) are provided after and as prevention to inpatient services for the chronically mentally ill. Day Services provide therapeutic programs at the Mental Health Center. Community Support serves the more resistive client through community outreach. Both programs are at or near capacity; however, demand for these services remains high.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Overall patient participation in outside meaningful activity in the community support program.	59%	60%	60%	60%	—

Standard Explanation

The Community Support program provides case management and supportive services to the chronic and persistent mentally ill client. Participation in outside meaningful activity is a therapeutic goal of the program and is essential to reintegration self-reliance within the community. The performance standard attempts to have at least 50% of the CSP population involved in competitive employment either full or part time, vocational programming, school, homemaking or volunteer work throughout the year.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	39.38	40.13	40.13	40.13	0.00
Personnel Costs	\$2,958,836	\$3,082,143	\$3,179,177	\$3,263,780	\$181,637
Operating Expenses	\$4,319,318	\$4,200,837	\$4,434,300	\$4,521,879	\$321,042
Interdept. Charges	\$259,053	\$324,128	\$308,749	\$317,589	(\$6,539)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$7,537,207	\$7,607,108	\$7,922,226	\$8,103,248	\$496,140
General Government	\$334,635	\$342,638	\$342,638	\$342,638	\$0
Charges for Services	\$828,289	\$936,327	\$1,060,631	\$1,105,000	\$168,673
Other Revenue	\$1,113,751	\$1,034,500	\$1,164,000	\$1,143,644	\$109,144
Total Revenues:	\$2,276,675	\$2,313,465	\$2,567,269	\$2,591,282	\$277,817
Tax Levy	\$5,260,532	\$5,293,643	\$5,354,957	\$5,511,966	\$218,323

Program Highlights

Personnel cost increases reflect general wage and health insurance increase for staff.

Residential placement days increase from 28,500 to 30,744 days of care in 2004 and include one additional day due to leap year. Increased days and general inflationary increases (avg. 3%) result in an operating expense expenditure increase of \$210,145. Additional operating expense increases include \$52,267 for drugs and pharmaceuticals, \$34,573 for medical services and additional hospital inpatient services of \$45,000 to handle Mental Health Center overflow needs due to reaching bed capacity. Operating expenses also include \$15,000 for additional Community Support case management/supervision services. These increases are partially offset by a State mental health institute expense decrease of \$60,000 to reflect a newly created dual diagnosis alternative program, which is budgeted within the Alcohol and Other Drug Abuse Clinic and Support Services Program.



Human Services Fund

Health & Human Services

Program

Mental Health Outpatient and Support Services (cont.)

Additional client fees are reflective of increased collections in Outpatient Mental Health & Community Support programming. Drug co-payment initiative (\$15 per script) will be instituted to support medication program. The \$109,144 increase in other revenue reflects increased Community Services Deficit Reduction (CSDR) funding. CSDR is a funding source in which counties receive federal payment for allowable MA costs which were originally funded through levy.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Community Support: number of clients	165	190	180	190	-
Day Services: number of clients	229	238	235	238	-
State Institutions: days of care	1,281	443	275	321	(122)
Residential Care: days of care	24,908	28,500	29,755	30,744	2,244
Outpatient Clients	2,639	-	2,990	2,990	-

Alcohol & Other Drug Abuse Outpatient Clinic and Support Services

Program Description

The alcohol and other drug abuse (AODA) programs provide intervention and treatment services to Waukesha County residents at risk due to alcohol and drug usage. Education, support, and outpatient programs are designed to meet both interdepartmental and community needs. The Intoxicated Driver Program (IDP), Wisconsin Chapter 20, mandates assessment for all individuals convicted of operating a motor vehicle while intoxicated. The convicted driver pays assessment fees. Assessment revenues are utilized to cover the cost of the assessment program. Programs are contracted with community agencies, hospitals, and the County operated clinic in the least restrictive and most cost effective setting possible. Those persons who qualify for Intoxicated Driver Program funds are allocated funding through state surcharge revenues.



Performance Measure	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Overall percent of AODA detoxification clients who are assessed and evaluated for an appropriate level of AODA treatments within 72 hours for HSD staff	99%	98%	99%	98%	-
Overall percent of AODA outpatient clients who abstain or reduce usage at discharge	87%	80%	87%	80%	-

Standard Explanation

Individuals in need of detoxification require a comprehensive assessment to determine a level of treatment intervention beyond medical detoxification. Human Service staff will provide AODA assessment within 72 hours for 95% of all detoxification clients who present at local hospitals, emergency rooms and at the Mental Health Center.

As a result of AODA outpatient treatment, 70% of all clients should report abstinence or reduced usage at time of discharge.

Human Services Fund

Health & Human Services

Program

Alcohol & Other Drug Abuse Outpatient Clinic and Support Services (cont.)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	11.30	11.30	11.30	11.30	0.00
Personnel Costs	\$719,719	\$758,959	\$764,087	\$795,053	\$36,094
Operating Expenses	\$1,558,654	\$1,351,392	\$1,473,936	\$1,449,354	\$97,962
Interdept. Charges	\$0	\$19,683	\$19,683	\$21,173	\$1,490
Total Expenditures:	\$2,278,373	\$2,130,034	\$2,257,706	\$2,265,580	\$135,546
General Government	\$660,402	\$722,716	\$660,402	\$660,402	(\$62,314)
Fines/Licenses	\$441,889	\$450,000	\$450,000	\$450,000	\$0
Charges for Services	\$245,904	\$285,000	\$295,000	\$315,000	\$30,000
Other Revenue	\$0	\$0	\$0	\$0	\$0
Total Revenues:	\$1,348,195	\$1,457,716	\$1,405,402	\$1,425,402	(\$32,314)
Tax Levy	\$930,178	\$672,318	\$852,304	\$840,178	\$167,860



Program Highlights

Personnel costs reflect general wage and health insurance increase. Operating expense include inflationary increases for residential contracts (3%), increased halfway house days of \$50,000 (749 additional days), and \$35,000 for a locked dual diagnosis program to reduce institute placements. The decrease in General Governmental Revenue of \$62,314 is due to the Youth Aids AODA revenue now being recognized and earned entirely in the Children and Family Services Division. Charges for service increase \$30,000 to reflect recent trends in AODA client fee collections.



Activity

	2002 <u>Actual</u>	2003 <u>Budget</u>	2003 <u>Estimate</u>	2004 <u>Budget</u>	Budget <u>Change</u>
Detoxification: Days of Care	456	415	410	400	(15)
Inpatient Residential Care: Days of Care	1,124	1,013	1,013	1,013	-
Clients Receiving Detox	200	165	156	155	(10)
Outpatient Clients	1,205	-	1,330	1,330	-

Criminal Justice Collaborating Council

Program Description

With the support of the Chief Judge, County Executive, and County Board, the Waukesha County Criminal Justice Collaborating Council was established in the Fall of 2002. The Council was formed with several goals in mind including better understanding of crime and criminal justice problems, greater cooperation among agencies and units of local government, clearer objectives and priorities, more effective resource allocation, and the creation of additional criminal justice programming. The Council feels that taken together, these results can increase public confidence in and support for criminal justice processes, and enhance system performance. The Council's Mission is as follows:

The mission of the Criminal Justice Collaborating Council is to enhance public safety and the effective and efficient administration of the criminal justice system through community collaboration by ensuring offender accountability and providing rehabilitation services, while recognizing the rights and needs of victims.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate (a)	2004 Budget	Budget Change
CSP Huber Jail Days Saved	1,329	N/A	1,379	1,379	N/A
CTP Recidivism Rate*	N/A	N/A	38%	40%	N/A

*Please refer to Achievement #10 for additional information.

For every 24 hours a participant in the Community Support Program was placed in a community service position one Huber jail day is taken off their sentence.

Pretrial screening services are expected to screen all pretrial inmates to collect and verify information useful to justice partners. These services will allow for more expeditious initial appearances as well as allow the CJCC to collect data that will be used to assist in assessing the need for and creating and implementing future diversion programming.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE) (a)	0.00	0.00	0.00	0.00	0.00
(a)					
Operating Expenses	\$107,084	\$206,825	\$249,189	\$306,613	\$99,788
Interdept. Charges	\$0	\$0	\$2,000	\$2,000	\$2,000
Total Expenditures (b):	\$107,084	\$206,825	\$251,189	\$308,613	\$101,788
General Government	\$15,912	\$15,912	\$17,160	\$17,700	\$1,788
Other Revenue	\$3,435	\$0	\$0	\$0	\$0
Total Revenues:	\$19,347	\$15,912	\$17,160	\$17,700	\$1,788
Tax Levy	\$87,737	\$190,913	\$234,029	\$290,913	\$100,000

(b) No County positions are directly budgeted for Criminal Justice Collaborating Council program, 1.0 FTE Mental Health Counselor is budgeted within the Mental Health Outpatient program and provides CTP services.

Additionally operating expenses include contracted coordinator, consulting and pretrial screening services.

(c) The 2003 estimate exceed 2003 budget due to carryover of 2002 expenditure authority approved through separate County Board ordinance.

Program Highlights

Operating expenses include; contracted pretrial screening services are budgeted at \$90,200, which is unchanged from 2003 budgeted levels. Pretrial screening services are anticipated to begin September 2003. Contracted screeners will collect and verify demographic and financial data for all jail inmates prior to their initial court appearance. Additionally, operating expenses include \$72,800 for Coordinator and Criminal Justice consulting services as well as funding for strategic planning, training and office related expenses.

Criminal Justice Collaborating Council (cont.)

Operating costs also include \$44,000 for the Community Transition Program (CTP) an increase of \$34,800 from 2003 budgeted levels. CTP programming includes expenditures for psychiatric services, medication, client transportation and living expenses. Personnel costs related to case management continue to be budgeted within the Mental Health Outpatient program budget.

Contracted Community Support (CSP) programming increases \$3,575 to \$35,400 and provides an increase of coordinator hours from 24 to 29 hours per week. CSP services are designed to coordinate community service opportunities for Huber inmates. This is a collaborative program funded through 50% County tax levy and Wisconsin Department of Corrections. General government revenue associated with the CSP program increases \$1,788 over 2003 budgeted levels to \$17,700.

Operating costs also include \$50,000 for contract services for future program implementation.

Interdepartmental charges include \$2,000 for phone and printing related expenses.



Activity	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
CJCC/Committee Meetings	N/A	N/A	26	90	N/A
CTP Case Management Caseload	89	N/A	89	65	N/A
CTP Jail Contacts	208	N/A	150	150	N/A
CSP Community Service Hours	39,280	N/A	41,000	41,000	N/A

Long-Term Care Health & Human Services Fund Purpose/Summary

Fund Purpose

This fund provides for county administration of human services programs funded by county, state, and federal dollars. Major sources of revenue include: county funds, Social Security/Supplemental Security Income, Community Options Program funds, and Community Integration Program funds (Wisconsin Medical Assistance Waiver Programs). This fund includes services to eligible persons who are elderly, have a developmental disability, a long-term mental illness, a physical disability, and those adults that are incapable of providing for their needs for food, shelter, clothing, personal or health care due to diminished cognitive capacity.

Financial Summary

	2002 Actual	2003 Adopted Budget	2003 Estimate (a)	2004 Budget	Change from 2003 Adopted Budget	
					\$	%
Long-Term Care Fund						
Personnel Costs	\$2,262,045	\$2,331,822	\$2,283,407	\$2,407,839	\$76,017	3.3%
Operating Expenses	\$24,951,410	\$26,292,773	\$27,080,975	\$28,573,523	\$2,280,750	8.7%
Interdept. Charges	\$173,981	\$205,056	\$201,147	\$226,534	\$21,478	10.5%
Fixed Assets	\$0	\$0	\$0	\$0	\$0	N/A
Total Expenditures	\$27,387,436	\$28,829,651	\$29,565,529	\$31,207,896	\$2,378,245	8.2%
General Government	\$23,606,393	\$24,601,527	\$25,589,126	\$26,918,235	\$2,316,708	9.4%
Charges for Services	\$398,981	\$520,400	\$452,860	\$448,600	(\$71,800)	-13.8%
Other Revenue	\$2,079,997	\$1,899,209	\$2,023,500	\$2,041,300	\$142,091	7.5%
Total Revenues	\$26,085,371	\$27,021,136	\$28,065,486	\$29,408,135	\$2,386,999	8.8%
Tax Levy	\$1,302,065	\$1,808,515	\$1,500,043	\$1,799,761	(\$8,754)	-0.5%

Position Summary (FTE)

Regular Positions	34.50	33.50	33.50	32.50	(1.00)
Extra Help	0.00	0.00	0.00	0.00	0.00
Overtime	0.02	0.02	0.02	0.02	0.00
Total	34.52	33.52	33.52	32.52	(1.00)

(a) The 2003 estimate exceeds 2003 adopted budget, the Department anticipates the need to process an ordinance in the 4th quarter to appropriate additional revenue and expenditure authority.

Departmental Objectives

1. Increase federal financial participation by converting eligible individuals with developmental disabilities from community aids/tax levy funding to Medicaid waiver funding. (1st Quarter 2004) (Critical Issue #2)
2. Provide targeted training to assist staff to more accurately reflect time spent and recording of case management hours. (1st Quarter 2004) (Critical Issue #2)
3. Develop a method to measure client/customer satisfaction with the LTC services that are provided and purchased. Test and implement the methodology. (4th Quarter 2004) (Critical Issue #3)
4. Relocate 10 frail elderly and/or individuals with physical disabilities from skilled nursing facilities to community settings pending the availability of state and federal funding. (4th Quarter 2004) (Critical Issue #1)

Major Departmental Strategic Achievements from 7/01/02 to 6/30/03

1. Developed a database that identifies Long Term Care Division clients that may be at risk of vulnerability due to temperature extremes, power outages, floods, etc. Division supervisors maintain the accuracy of the information. (Critical Issue #1, 3, and 4)
2. Purchased intensive behavioral treatment for individuals with developmental disabilities who exhibit extremely challenging behaviors. Due to treatment success, two individuals have been returned to community settings. (Critical Issue #1)
3. Expanded the pool of residential providers by three to meet the needs of Long Term Care Division clients. All three new providers specialize in providing residential services to individuals who exhibit challenging behaviors. (Critical Issue #1)
4. Relocated 13 frail elderly and individuals with physical disabilities from skilled nursing facilities to community settings. The Department of Health and Family Services made state and federal funding available to accomplish this goal. Besides these relocations, the division was also able to provide services to 81 frail elderly and people with physical disabilities who were waiting for a variety of services. (Critical Issue #2)

Adult Protective Services/Community Care

Program Description

Provides cost effective service intervention for vulnerable adults to ensure their safety and well being, protects them from exploitation and harm, and preserves their maximum level of personal independence. Also administers the Alzheimer's Families Caregiver Support Program.

**Performance Measures**

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Completion of court-ordered comprehensive evaluation within 96 hours prior to final hearing	100%	100%	100%	100%	0%

Standard

100% compliance, penalty for non-compliance is fines and/or incarceration.

Staffing (FTE)	9.00	8.00	8.00	8.00	0.00
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Personnel Costs	\$542,566	\$524,756	\$530,817	\$558,505	\$33,749
Operating Expenses	\$461,978	\$522,466	\$504,933	\$543,537	\$21,071
Interdept. Charges	\$17,595	\$20,980	\$21,555	\$23,779	\$2,799
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$1,022,139	\$1,068,202	\$1,057,305	\$1,125,821	\$57,619
General Government	\$358,314	\$358,544	\$358,544	\$358,544	\$0
Charges for Services	\$35,918	\$60,000	\$35,900	\$40,000	(\$20,000)
Other Revenue	\$34,920	\$7,589	\$18,900	\$19,500	\$11,911
Total Revenues:	\$429,152	\$426,133	\$413,344	\$418,044	(\$8,089)
Tax Levy	\$592,987	\$642,069	\$643,961	\$707,777	\$65,708

**Program Highlights**

Personnel costs increase due to wage adjustments and health insurance increases.

Operating expenses increase due to rising contracted services costs of \$23,934 reflecting cost of living adjustments and the specific service needs of clients served. Operating expense increases are partially offset by a \$2,843 decrease in costs associated with the unfunding 1.00 FTE Human Services Support Specialist in the 2003 department budget. Interdepartmental charges increase primarily due to higher computer maintenance charges.

Charges for service revenues decrease \$20,000 due to the inability to recover costs associated with protective services/placement from clients served. Other revenues increase \$11,911, a result of the department becoming protective payee for several clients served in this program area.

**Activity**

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of Watts Court Ordered Assessment Reviews	176	210	206	210	—
Alzheimer's Families Caregiver Support Clients Served	26	26	26	26	—

Developmental Disabilities Services

Program Description

Provides, arranges, coordinates, and manages specialized cost effective services to children and adults who have a disability attributable to mental retardation, cerebral palsy, epilepsy, autism, prader-willi syndrome and traumatic brain injury. Services are directed toward the prevention and alleviation of a developmental disability or toward the social, personal, physical or economic habilitation or rehabilitation of an individual with such a disability. Expenditures in this program area are funded through a combination of Medical Assistance, Community Aids and tax levy.

**Performance Measures**

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of recorded case management hours as a percentage of total available hours.	55%	56%	56%	58%	2%

Dept. Standard

The number of recorded case management hours has a direct impact on Medicaid and Medicaid Waiver revenue. The activities staff can record as case management are well defined by federal and state rules.

Staffing (FTE)	13.50	13.50	13.50	13.50	0.00
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Personnel Costs	\$1,003,919	\$1,054,627	\$1,054,477	\$1,105,224	\$50,597
Operating Expenses	\$8,833,905	\$9,175,952	\$9,155,817	\$10,288,934	\$1,112,982
Interdept. Charges	\$85,125	\$92,254	\$94,963	\$105,340	\$13,086
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$9,922,949	\$10,322,833	\$10,305,257	\$11,499,498	\$1,176,665
General Government	\$6,274,529	\$6,434,549	\$7,040,875	\$7,600,748	\$1,166,199
Charges for Services	\$109,005	\$120,000	\$135,360	\$125,000	\$5,000
Other Revenue	\$1,989,203	\$1,837,020	\$1,950,000	\$1,967,200	\$130,180
Total Revenues:	\$8,372,737	\$8,391,569	\$9,126,235	\$9,692,948	\$1,301,379
Tax Levy	\$1,550,212	\$1,931,264	\$1,179,022	\$1,806,550	(\$124,714)

Program Highlights

Personnel costs increases reflect cost to continue 13.50 FTE.

Operating expenses increase due to the conversion of eligible individuals from community aids/tax levy funding to Medicaid waiver funding increasing CIP IB Local Match expenses by \$1,361,709. Days of care increase by 13,504 days. Brain injury waiver expenses increase by \$173,385 as days of care increase 747 days. This is offset by a decrease in contracted service of \$421,580. Interdepartmental charges increase primarily due to a reallocation of central services postage charges of \$10,000 from fund 150 to fund 310 to more accurately reflect volume and a \$5,990 increase in computer maintenance charges. These interdepartmental charge increases are partially offset by a \$3,030 decrease in printing and copy charges.

General government revenues increase primarily due to CIP IB Local Match revenue of \$963,618 and Brain Injury waiver revenue of \$195,181. Other revenues increase due to cost of living adjustments in social security revenue and anticipated recoveries from select vendors.

Activity**Waiver Services – Brain Injury****Overview:**

A Medical Assistance waiver for a limited number of people with brain injuries who need significant supports in the community. Persons eligible for the brain injury waiver must be eligible for Medicaid and meet the definition of brain injury in HSS 51.01 (2g) of the Wisconsin State statutes. In addition, the persons must be receiving or be eligible to receive post acute rehabilitation services in a nursing home or hospital designated as a special unit for brain injury rehabilitation by the Wisconsin Medical Assistance Program (WMAP). The person must also have, as a result of the injury, significant physical, cognitive, emotional and/or behavioral impairments.



 Developmental Disabilities Services (Cont.)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Waiver Services - Brain Injury-Days of Care	5,749	5,475	6,205	6,222	747
Waiver Services - Brain Injury-Avg Cost/Day	\$152.26	\$142.80	\$152.44	\$157.02	\$14.22

Waiver Services – CIP 1B Local Match**Overview:**

Funded by Medical Assistance (federal share), community aids and tax levy (local match) to provide community services to persons with developmental disabilities who are relocated or diverted from nursing homes and Intermediate Care Facilities – Mental Retardation (ICF's-MR) other than the State Centers for the Developmentally Disabled.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Waiver Services – CIP 1B Local Match-Days of Care	64,569	65,482	67,113	78,986	13,504
Waiver Services – CIP 1B Local Match- Avg Cost/Day	\$56.92	\$57.06	\$65.03	\$67.18	\$10.12

Family Support Program**Overview:**

The Family Support Program (state funded) was created to enable parents of children who have severe disabilities to care for their children in their own homes rather than placing them in institutions or other out-of-home placements, thereby enhancing the quality of their life.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of Participants	90	85	91	85	—
Cost/year/participant	\$2,497.00	\$2,616.00	\$2,449.00	\$2,616.00	—

 Community Integration/Options Services
Program Description

Arranges, coordinates, and manages cost effective service to eligible persons with infirmities of aging, persons with physical disabilities, developmental disabilities, and serious mental illness to divert or relocate these individuals from Medical Assistance funded institutional care. Expenditures in this program area are funded through a combination of Medical Assistance and Community Options Program funding.

**Performance Measures**

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of recorded case management hours as a percentage of total available hours.	58%	56%	59%	58%	2%

Dept. Standard

The number of recorded Medicaid waiver funded case management hours has a direct impact on revenues. The activities staff can record as case management are well defined by state rules.

Long-Term Care Health & Human Services Program

Community Integration/Options Services (cont.)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	12.02	12.02	12.02	11.02	(1.00)
Personnel Costs	\$715,560	\$752,439	\$698,113	\$744,110	(\$8,329)
Operating Expenses	\$15,655,527	\$16,594,355	\$17,420,225	\$17,741,052	\$1,146,697
Interdept. Charges	\$71,261	\$91,822	\$84,629	\$97,415	\$5,593
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$16,442,348	\$17,438,616	\$18,202,967	\$18,582,577	\$1,143,961
General Government	\$16,973,550	\$17,808,434	\$18,189,707	\$18,958,943	\$1,150,509
Charges for Services	\$254,058	\$340,400	\$281,600	\$283,600	(\$56,800)
Other Revenue	\$55,874	\$54,600	\$54,600	\$54,600	\$0
Total Revenues:	\$17,283,482	\$18,203,434	\$18,525,907	\$19,297,143	\$1,093,709
Tax Levy	(\$841,134)	(\$764,818)	(\$322,940)	(\$714,566)	\$50,252



Program Highlights

Personnel costs increases associated with wage adjustments and health insurance cost increases for 11.02 FTE are more than offset by the transfer of 1.00 FTE accounts payable staff from the Long Term Care division to the Human Services Fund Administrative program. The transfer accommodates the state's cost reporting methodology, which requires administrative staff to be assigned to administrative cost centers. Operating expenses increase primarily due to increased days of care as follows:

Funding Source	Expense	Days
COP	↑ \$133,008	↑ 2,674
CIP II	↑ \$215,369	↑ 2,987
COP-W	↑ \$223,025	↑ 10,622
CIPIB	↑ \$149,224	↓ 302
CIPIB-COP	↑ \$375,682	↑ 53
CIP 1A	↑ \$56,546	↑ 60

The above operational expenses for increased days of care are slightly offset by various small decreases in cost.

Interdepartmental charges increase due to computer maintenance charges.

General government revenues increase reflecting the Medicaid waiver activity outlined above. Charges for services decrease \$56,800 mostly due to fewer Medicaid personal care eligible clients.



Activity

Community Options Program (COP)

Overview:

The Community Options Program or "regular community options" uses state funds to deliver community-based services to Wisconsin citizens who need long term assistance in performing activities of daily living. These state funds may also be used to fund the match, if necessary, for waiver programs such as CIP 1A, CIP 1B and COP-Waiver.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
COP – Days of Care	39,258	40,880	44,000	43,554	2,674
COP – Avg Cost per Day of Care	\$26.03	\$24.48	\$24.50	\$25.82	\$1.34

Community Integration/Options Services (Cont.)

Community Integration Program II (CIP II)**Overview:**

Funded by Medical Assistance to provide community services to elderly and physically disabled persons after a nursing home bed is closed due to relocation activities.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
CIP II – Days of Care	21,167	21,170	23,102	24,156	2,986
CIP II – Avg Cost per Day of Care	\$47.33	\$46.98	\$49.16	\$51.95	\$4.97

Community Options Program Waiver (COP-W)**Overview:**

Funded by Medical Assistance (federal share) and COP (local match) to provide home and community-based care to elderly and physically disabled citizens who have long-term care needs and who would otherwise be eligible for Medical Assistance reimbursement in a nursing home.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
COP W – Days of Care	127,660	129,819	130,004	140,441	10,622
COP W – Avg Cost per Day of Care	\$53.37	\$52.67	\$57.21	\$53.00	\$3.33

Community Integration Program 1B – Fully Funded**Overview:**

Funded by Medical Assistance (federal share) and COP (local match) to provide community service to persons with developmental disabilities who are relocated or diverted from nursing homes and Intermediate Care Facilities – Mental Retardation.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
CIP 1B – Days of Care	21,252	23,360	22,995	23,058	(302)
CIP 1B - Avg Cost per Day of Care	\$103.59	\$110.78	\$111.63	\$116.06	\$5.28

Community Integration Program 1B – COP as Match**Overview:**

Funded by Medical Assistance (federal share) and COP (local match) to provide community service to person with developmental disabilities who are relocated or diverted from nursing homes and Intermediate Care Facilities – Mental Retardation.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
CIP 1B – Days of Care	18,937	19,345	19,314	19,398	53
CIP 1B - Avg Cost per Day of Care	\$128.41	\$127.32	\$143.38	\$148.18	\$20.86

Community Integration Program 1A – Fully Funded**Overview:**

Funded by Medical Assistance (federal share) and COP (local match) to provide community service to persons with developmental disabilities who are relocated from the State Centers for the Developmentally Disabled.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
CIP 1A – Days of Care	21,434	21,900	21,855	21,960	60
CIP 1A - Avg Cost per Day of Care	\$172.45	\$180.54	\$182.19	\$188.14	\$7.60

Health & Human Services Fund Purpose/ Center Fund Summary

Fund Purpose

This fund reports operations at the Mental Health Center for accounting purposes and State/Federal reporting including Medicare Cost Report requirements. This fund provides for all services related to admissions to the hospital for psychiatric emergency and other psychiatric hospitalizations.

Financial Summary

	2002 Actual	2003 Adopted Budget	2003 Estimate (a)	2004 Budget	Change from 2003 Adopted Budget	
					\$	%
Mental Health Center Fund						
Personnel Costs	\$2,752,386	\$2,829,422	\$2,844,096	\$2,973,550	\$144,128	5.1%
Operating Expenses	\$804,111	\$857,436	\$942,284	\$983,360	\$125,924	14.7%
Interdept. Charges	\$445,062	\$523,752	\$502,712	\$526,086	\$2,334	0.4%
Fixed Assets	\$0	\$0	\$0	\$0	\$0	N/A
Total Expenditures	\$4,001,559	\$4,210,610	\$4,289,092	\$4,482,996	\$272,386	6.5%
General Government	\$0	\$0	\$0	\$0	\$0	N/A
Fine/Licenses	\$0	\$0	\$0	\$0	\$0	N/A
Charges for Services	\$1,896,259	\$2,250,600	\$1,992,000	\$2,084,000	(\$166,600)	-7.4%
Interdepartmental	\$0	\$0	\$0	\$0	\$0	N/A
Other Revenue	\$4,586	\$0	\$0	\$50,000	\$50,000	N/A
Total Revenue	\$1,900,845	\$2,250,600	\$1,992,000	\$2,134,000	(\$116,600)	-5.2%
Tax Levy (b)	\$2,100,714	\$1,960,010	\$2,297,092	\$2,348,996	\$388,986	19.8%

Position Summary (FTE)

Regular Positions	39.96	39.96	39.96	40.46	0.50
Extra Help	3.30	3.30	3.30	2.18	(1.12)
Overtime	0.52	0.52	0.52	0.52	0.00
Total	43.78	43.78	43.78	43.16	(0.62)

- (a) The 2003 estimate exceeds the 2003 adopted budget, the Department anticipates the need to process an ordinance in the 4th quarter to appropriate additional revenue and expenditure authority.
- (b) Other revenues include fund balance of \$50,000 in 2004.
- (c) The adopted levy for 2002 was \$2,046,034. The amount shown for 2002 is actual expenditures less actual revenue.

Departmental Objectives

1. Provide individual assessments, utilization review, and discharge planning for a projected 1,227 clients in 2004 to meet 51.42 service requirements. (Critical Issue #1)
2. Provide AODA support services for an expected 100 clients processed through 51.45 detentions to meet 51.42 statutory requirements for detoxification services. (Critical Issue #1)
3. Continue computerization upgrades in the inpatient service area to implement Avatar Practice Management System. (Critical Issue #3)

Major Departmental Strategic Achievements from 7/01/02 to 6/30/03

1. Provided individual assessments, utilization review, and discharge planning for 1,219 clients to meet 51.42 service requirements. (Critical Issue #1)
2. Provided AODA support services for 93 clients processed through 51.45 detentions to meet 51.42 statutory requirements for detoxification services. (Critical Issue #1)
3. Implemented computerization upgrades in the inpatient service area to increase internet/intranet access/drug interaction programs and to fully utilize PeopleLink. (Critical Issue #3)
4. The department utilized the video conferencing system in 2003 to reduce transportation and associated costs with patient court hearings. (Critical Issue #3)

Hospital Inpatient Service

Program Description

The inpatient program of the Mental Health Center provides 24-hour care to court-involved and voluntary mentally ill individuals for which a range of services are included such as diagnosis; medication monitoring and stabilization; individual, couple, and group counseling; and development of aftercare services.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Overall Patient Care					
Utilization of the Mental Health Center**	94%	95%	95%	95%	0%

Standard

The Mental Health Center provides 95% of all adult mental health inpatient care delivered through Health and Human Services. Use of outside inpatient facilities for mental health inpatient care should be less than 5% of total inpatient care delivered through Department of Health and Human Services.

** Occasionally patients need to be served in an inpatient setting outside of the Mental Health Center due to specialized treatment needs or security, overflow and patient safety concerns. The incidents should remain less than 5% of all inpatient admissions authorized by Department of Health and Human Services.

Mental Health Center Fund Health and Human Services Program

Hospital Inpatient Service (cont.)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	43.78	43.78	43.78	43.16	(0.62)
Personnel Costs	\$2,752,386	\$2,829,422	\$2,844,096	\$2,973,550	\$144,128
Operating Expenses	\$804,111	\$857,436	\$942,284	\$983,360	\$125,924
Interdept. Charges	\$445,062	\$523,752	\$502,712	\$526,086	\$2,334
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$4,001,559	\$4,210,610	\$4,289,092	\$4,482,996	\$272,386
General Government	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$1,896,259	\$2,250,600	\$1,992,000	\$2,084,000	(\$166,600)
Other Revenue	\$4,586	\$0	\$0	\$50,000	\$50,000
Total Revenues:	\$1,900,845	\$2,250,600	\$1,992,000	\$2,134,000	(\$116,600)
Tax Levy	\$2,100,714	\$1,960,010	\$2,297,092	\$2,348,996	\$388,986



Program Highlights

Personnel cost increases reflect general wage and benefit increases for base staff and an additional \$39,700 for staffing needs associated with extended family/medical leaves. In order to provide for a more stable staffing pattern in a 24-hour environment, two 0.50 FTE regular part-time Registered Nurses positions are created and funded through the reduction of 1.12 FTE extra help Registered Nurse positions. Personnel costs also reflect the transfer of a 0.50 FTE Account Clerk II to the Human Services Fund to facilitate administrative cost reporting.

Operating expenses increase \$125,924 reflecting service trends as well as inflationary cost increases. Major base operating increases include; \$66,000 for medication expenses, \$25,000 for medical services, \$8,500 for food service and \$6,175 for transcription. Operating expenses also include \$24,953 in one-time expenses necessary to retrofit patient rooms with safer hardware and fixtures as recommended by state engineering staff.

Interdepartmental charges increase \$2,334 reflecting a \$25,600 increase in building maintenance and housekeeping associated with increased activity, being partially offset by a \$15,000 reallocation of collection charges to the Human Services Fund and a \$8,960 decrease in imaging charges.

Charges for service revenue decrease based on a review of 2003 six-month actual revenue experience. Other revenues increase \$50,000 reflecting the appropriation of Mental Health Center Fund balance to fund one-time building maintenance projects and the costs associated with retrofitting patient rooms with safer fixtures/hardware.



Activity

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Days of Care	7,127	7,462	7,574	7,595	133
Admissions	1,189	1,148	1,224	1,227	79
Discharges	1,182	1,148	1,224	1,227	79
Average Length of Stay	6.1	6.5	6.5	6.5	0

General Fund	Health & Human Services	Fund Purpose/ Summary
Public Health		

Fund Purpose

The primary purpose of Public Health Services is to address aggregate populations who are at risk for diseases or injuries that are within the scope of prevention, protection or control.

Financial Summary

	2002 Actual	2003 Adopted Budget	2003 Estimate	2004 Budget	Change from 2003 Adopted Budget	
					\$	%
General Fund						
Personnel Costs	\$2,116,190	\$2,312,454	\$2,040,307	\$2,390,534	\$78,080	3.4%
Operating Expenses	\$410,555	\$348,738	\$386,423	\$447,335	\$98,597	28.3%
Interdept. Charges	\$150,402	\$202,315	\$177,282	\$178,905	(\$23,410)	-11.6%
Fixed Assets	\$0	\$0	\$0	\$0	\$0	N/A
Total Expenditures	\$2,677,147	\$2,863,507	\$2,604,012	\$3,016,774	\$153,267	5.4%
General Government	\$645,902	\$622,395	\$619,685	\$718,534	\$96,139	15.4%
Fine/Licenses	\$0	\$0	\$0	\$0	\$0	N/A
Charges for Services	\$281,989	\$250,571	\$244,863	\$274,210	\$23,639	9.4%
Interdepartmental	\$3,243	\$2,278	\$3,079	\$2,190	(\$88)	-3.9%
Other Revenue	\$2,921	\$0	\$0	\$0	\$0	N/A
Total Revenues	\$934,055	\$875,244	\$867,627	\$994,934	\$119,690	13.7%
Tax Levy (a)	\$1,743,092	\$1,988,263	\$1,736,385	\$2,021,840	\$33,577	1.7%

(a) The adopted levy for 2002 was \$1,888,475. The amount shown for 2002 is actual expenditures less actual revenue a difference of \$145,383.

Position Summary (FTE)

Regular Positions	36.20	36.20	36.20	35.94	(0.26)
Extra Help	5.59	3.69	3.69	3.64	(0.05)
Overtime	0.05	0.05	0.05	0.02	(0.03)
Total	41.84	39.94	39.94	39.60	(0.34)

Departmental Objectives

1. The Public Health Division's primary objectives for 2004 is to build local and regional public health infrastructure to respond to bio-terrorism and infectious disease outbreaks through membership and accomplishments of the Milwaukee-Waukesha Public Health Consortium preparedness objectives listed below. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
2. The Milwaukee-Waukesha Consortium member agencies will be better prepared to receive and distribute federal emergency pharmaceuticals and medical supplies by completing an operational Strategic National Stockpile (SNS) Plan that is referenced or appended to their local/county Emergency Operations Plan (EOP). (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
3. The Milwaukee-Waukesha Consortium member agencies will be better prepared to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies as part of an overall post-event preparedness strategy by maintaining a trained Post-Event Response Team (PERT). (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
4. An operational Consortium Public Health Preparedness and Response Plan that is referenced in or appended to each member agency's local/county Emergency Operations Plan (EOP) will be completed to better prepare the Milwaukee-Waukesha Consortium to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
5. Participate in a Mass Vaccination Exercise that incorporates applicable Strategic National Stockpile Plans conducted by the Consortium to better prepare the Milwaukee-Waukesha Consortium member agencies to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
6. Increase the capacity of the Milwaukee-Waukesha Consortium member agencies (or having access to) professionals that are able to address core public health competencies in one or more areas of infectious disease control, epidemiology, data gathering, chemical/environmental event response, training, public education, information technology, and communication to better prepare the Milwaukee-Waukesha Consortium member agencies to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
7. Develop a Consortium 24 hours a day, 7 days a week (24/7 Response Plan and successfully completing an off business hours test of the plan in each member agency's jurisdiction to better prepare the Milwaukee-Waukesha Consortium member agencies to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
8. Sign a statewide Consortia Mutual Aid Agreement for coordination of public health preparedness and readiness between Consortia that extends across respective boundaries to better prepare the Milwaukee-Waukesha Consortium member agencies to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)
9. Develop and implement a Consortium training plan based on needs assessment results and core public health competencies to better prepare the Milwaukee-Waukesha Consortium member agencies to respond to bio-terrorism, other outbreaks of infectious disease, and other public health threats and emergencies. (4th Qtr. 2004) (Strategic Plan Critical Issue # 4)

Departmental Objectives (con't)

10. The special populations section of the Waukesha County Public Health Division Local Emergency Operations Plan will address the unique needs of the Maternal and Child Health Population. (4th Qtr.) (Strategic Plan Critical Issue # 4)

Major Department Strategic Achievements from 7/01/02 to 6/30/03

- 1) The Public Health Division accomplished three out of seven 2003 objectives. Achievements are listed below. The Division continues to work on the remaining four 2003 objectives.
- 2) The countywide emergency government Bio-terrorism Plan was completed and tested.
- 3) The Division participated in the Milwaukee-Waukesha Public Health Regional Consortium and is integrating the Waukesha County Bio-terrorism Response Plan into the Regional Preparedness and Bio-terrorism Response Plan.
- 4) The Division obtained employee personal protective clothing and gear to respond and contain bio-terrorism events or new communicable disease outbreaks. Staff received training on use of this equipment.

Administration

Program Description

The Public Health Administration staff provides administrative support to the public health sections; provides public health assessment, program development and evaluation; maintains the budget through management of expenditures and collection of revenues; manages grants, contracts and interdepartmental services; oversees facility maintenance; and provides timely reports for accountability.



Performance Measures

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
The Public Health Division will have multiple communication systems in place to ensure timely response to Public Health threats including Bioterrorism.	3 Systems	6 Systems	6 Systems	*8 Systems	2 Systems

*The systems will include the use of telephones, fax, E-mail, Telecommunication Device for the Deaf (TDD), language line, Fax Blast, radios and Blackberry units

Staffing (FTE)	3.50	3.76	3.76	3.47	(0.29)
Personnel Costs	\$207,838	\$233,539	\$221,427	\$233,834	\$295
Operating Expenses	\$54,244	\$43,447	\$39,318	\$34,942	(\$8,505)
Interdept. Charges	\$76,823	\$49,819	\$41,175	\$38,857	(\$10,962)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
Total Expenditures:	\$338,905	\$326,805	\$301,920	\$307,633	(\$19,172)
General Government	\$15,000	\$24,269	\$0	\$0	(\$24,269)
Other Revenue	\$2,921	\$0	\$0	\$0	\$0
Total Revenues:	\$17,921	\$24,269	\$0	\$0	(\$24,269)
Tax Levy	\$320,984	\$302,536	\$301,920	\$307,633	\$5,097



Program Highlights

Personnel costs reflect general wage and employee benefit cost increases mainly offset by the transfer of \$7,500 for 0.20 FTE Public Health Technician to the Child Health program and a transfer \$2,181 of 0.06 FTE Public Health Technician to Communicable Disease and an \$1,200 or 0.03 FTE decrease in overtime. Operating expenses and Interdepartmental charges are reduced due to a \$24,269 reduction of the Prevention Grant funding which is reflected in the General Government revenues.



Activity

The Public Health Manager participated in the first Milwaukee-Waukesha Public Health Unified Incident Command Center to bring under control the Monkeypox communicable disease outbreak in the Milwaukee and Waukesha Counties areas. This was the first time in the nation's history that this type of Incident Command Center was called up to contain a new infectious disease that arrived in the Western hemisphere.

Program Description

The Child Health Program is directed toward high-risk children who are at-risk for lead poisoning, retarded growth and development and medical problems due to neglect or abuse. Various public health local tax supported prevention projects are offered to Waukesha County high-risk children. They are Childhood Lead Poisoning screenings, Healthcheck physical examination screenings and Child At Risk (CAR) physical assessments of possibly physically abused and medically neglected children. Two State Grants enhance two local tax supported projects. They are: the Prevention of Child Abuse and Neglect Grant (POCAN) which provides case management to first time parents who are high risk and on Medicaid; and Childhood Lead Poisoning Prevention Grant provides funds to outreach high risk Latino families in houses built prior to 1950 or 1978 when lead based paints were used.

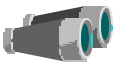
The purpose of child health services is to insure a healthy Waukesha citizenry.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of children tested for lead poisoning.	1,201	1,200	1,200	1,200	0
Number of Latino children screened for lead under the Lead Grant.	520	550	550	575	25
Total number of children treated for lead poisoning.	5	15	15	15	0
Number of Healthcheck examinations.	1,320	1,350	1,350	1,360	10
Number of Healthcheck serious health problems remediated/treated.	20	20	20	20	0
Number of CAR high risk/neglected children case managed.	236	200	200	200	0
Number of CAR high risk/neglected children entering Child Protective Services.	3	3	3	3	0
Number of POCAN high risk/neglected children case managed.	55	33	33	33	0
Number of POCAN high risk/neglected children entering child protective services.	0	0	1	0	0

Child Health (cont'd)

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Staffing (FTE)	5.50	4.45	4.45	4.65	0.20
Personnel Costs	\$198,959	\$250,148	\$191,915	\$272,240	\$22,092
Operating Expenses	\$133,379	\$112,804	\$111,717	\$111,184	(\$1,620)
Interdept. Charges	\$13,675	\$14,517	\$10,863	\$13,785	(\$732)
Total Expenditures:	\$346,013	\$377,469	\$314,495	\$397,209	\$19,740
General Government	\$172,087	\$154,250	\$148,129	\$149,570	(\$4,680)
Charges for Services	\$103,047	\$51,200	\$77,461	\$74,850	\$23,650
Total Revenues:	\$275,134	\$205,450	\$225,590	\$224,420	\$18,970
Tax Levy	\$70,879	\$172,019	\$88,905	\$172,789	\$770



Program Highlights

Personnel costs reflect general wage and employee benefit cost increase and the transfer in of \$7,500 for a 0.20 FTE Public Health Technician from the Administration division as a result of redirecting program emphasis due to grant funding changes. Operating expenses and interdepartmental charges are decreasing primarily due to the slightly lower Lead Grant funding in 2004.

General government funding is decreasing mostly due to a reduced 2004 Lead Grant. Charges for services revenue is increasing due to an increased number of Child and Adolescent Health Check examinations and an increase in Title 19 Health Check Revenues that result from increased billing efficiencies.



Activity

The Public Health Division and the Waukesha County Prevention Network is conducting a Child Lead Poisoning Prevention Community Awareness Campaign through 17 schools in Waukesha County. These schools are participating in Lead Poisoning Prevention educational displays and distributing educational packets.

Maternal Health

Program Description

The Maternal Health Case Management Program is targeted to Waukesha County low-income pregnant women at risk for delivering malformed and/or developmentally delayed infants due to malnutrition and low birth weight, alcohol and drug abuse and cigarette smoking.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of women enrolled in Prenatal Care Coordination Program.	104	100	100	100	0
Number of enrolled women who successfully completed the PNCC Program.	92	95	95	95	0
Number of women who delivered full term babies of average birth weight.	83	95	95	95	0
Staffing (FTE)	4.80	4.80	4.80	4.80	0.00

Personnel Costs	\$273,249	\$294,044	\$262,155	\$312,770	\$18,726
Operating Expenses	\$53,118	\$55,653	\$49,874	\$51,266	(\$4,387)
Interdept. Charges	\$10,695	\$17,953	\$15,554	\$20,741	\$2,788
Total Expenditures:	\$337,062	\$367,650	\$327,583	\$384,777	\$17,127
General Government	\$73,923	\$72,879	\$82,639	\$82,639	\$9,760
Charges for Services	\$39,580	\$40,000	\$43,166	\$40,000	\$0
Total Revenues:	\$113,503	\$112,879	\$125,805	\$122,639	\$9,760
Tax Levy	\$223,559	\$254,771	\$201,778	\$262,138	\$7,367



Program Highlights

Personnel costs reflect general wage and employee benefit cost increases. Operating expenses are decreasing mainly as a result of state discontinuation of a billable service for paraprofessionals providing Maternal and Child Health educational instruction in the home. Interdepartmental charges reflect an increase in the end user technology fee and computer maintenance charges.

General government revenue reflects a \$9,760 increase in the 2004 Maternal and Child Health state contract funding level over the 2003 budget amount.



Activity

The Public Health Division and the Waukesha Family Practice launched a new Prenatal Care Coordination (PNCC) enrollment process at the Family Practice Center. Public Health Nurses were assigned to the Family Practice Center to immediately enroll the women referred by the medical staff. The initiative has increased access to the Public Health Division PNCC Program and continues to support positive birthing outcomes for these clients.

Women, Infants, Children Nutrition Program (WIC)

Program Description

The Women, Infants and Children Nutrition (WIC) federally funded program provides nutrition assessments for prenatal and postpartum lactating mothers, infants under one year and children through five years of age. Nutrition recommendations are offered with corresponding vouchers specifically outlining food purchases that will remedy nutritional deficits.



Performance Measures

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Reduce nutrition related diseases by maintaining monthly WIC enrollment of at-risk mothers, infants and children.	1,963	2,120	2,120	2,120	0
Reduce low birth weight infants by increasing the enrollment of pregnant women in the first trimester.	162	181	181	196	15
Children identified with iron deficiencies.	115	116	118	119	3
Increase the percent of iron deficiency improvements within six months of entering the WIC nutrition program.	93 81%	92 80%	100 85%	102 86%	10 6%

Staffing (FTE)	5.07	5.07	5.07	5.07	0.00
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Personnel Costs	\$256,672	\$247,018	\$249,250	\$263,201	\$16,183
Operating Expenses	\$14,942	\$19,224	\$15,440	\$10,920	(\$8,304)
Interdept. Charges	\$23,617	\$28,989	\$29,459	\$25,582	(\$3,407)
Total Expenditures:	\$295,231	\$295,231	\$294,149	\$299,703	\$4,472
General Government	\$295,231	\$295,231	\$294,149	\$299,703	\$4,472
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Total Revenues:	\$295,231	\$295,231	\$294,149	\$299,703	\$4,472
Tax Levy	\$0	\$0	\$0	\$0	\$0



Program Highlights

Personnel costs reflect general wage and employee benefit cost increases. Operating expenses decrease primarily due to a reduction in two off site WIC Program Women Infant and Children satellite sites. Interdepartmental charges decrease due to estimated lower operating costs including gasoline and vehicle replacement charges, along with lower printing costs.

General government revenue reflects an increase in the 2004 WIC Grant funding allocation.

Women, Infants, Children Nutrition Program (WIC) (cont'd)

	<u>WIC Nutrition Services</u>				
	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>
State estimated eligible population per month	3,068	3,068	3,068	3,068	3,068
Average number of mothers, infants/children served per month	2,059	2,070	1,963	2,120	2,120
Total number of mothers, infants/children served per year	4,166	4,206	4,020	4,170	4,170

From July 1, 2002 to June 30 2003, WIC food vouchers supplemented Waukesha County commerical food vendors by \$1,435,689 dollars and local Waukesha County produce farmers by \$30,000 dollars.

Adult Health

Program Description

Adult health case management services are targeted to high risk, medically compromised adult and geriatric populations. Public health services are offered in clinics, worksites, and in the home. Services are directed at identifying early the preventable chronic diseases such as diabetes, heart disease and cancer. Medical crisis intervention is available through case management, which includes assessment and linking with medical and mental health providers and human services.

Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Worksite Health Screenings: Public Health screenings at various community locations, i.e., Health Fairs, Worksites and Wellness Programs	430	813	* 900	813	0
Numbers of medical problems identified and remediated	142	268	* 297	268	0
Adult Medical Crisis: Crisis Case Management: Individual Served - Public Health Care plans result in stabilization and enhanced independence. The Public Health Division standard is to stabilize 75% of all cases within 6 months.	122	120	120	120	0
Number of Public Health episodic home visit interventions needed for stabilization.	630	630	630	630	0

*Increased estimate due to a one-time large worksite event.

Staffing (FTE)	1.40	1.40	1.40	1.40	0.00
Personnel Costs	\$82,318	\$86,634	\$78,791	\$91,162	\$4,528
Operating Expenses	\$5,203	\$7,791	\$7,876	\$7,870	\$79
Interdept. Charges	\$2,366	\$12,950	\$13,086	\$4,348	(\$8,602)
Total Expenditures:	\$89,887	\$107,375	\$99,753	\$103,380	(\$3,995)
General Government	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$2,243	\$3,000	\$5,918	\$2,000	(\$1,000)
Interdepartmental	\$420	\$0	\$0	\$0	\$0
Total Revenues:	\$2,663	\$3,000	\$5,918	\$2,000	(\$1,000)
Tax Levy	\$87,224	\$104,375	\$93,835	\$101,380	(\$2,995)

Program Highlights

Personnel costs reflect general wage and employee benefit cost increases. Operating expenses are budgeted to slightly increase. Interdepartmental charges decrease reflect lower End User Technology Fund charges for computer replacement and maintenance charges. Charges for services revenue decrease \$1,000 to recognize lower expected worksite health screening revenues from 2003 budget levels.

Activity

The Public Health Division provided annual health screenings to the Waukesha County Mental Health Center Day Treatment and Community Outreach patients. Seventy-one (71) patients were screened. Thirty-eight (38) patients with medical problems were identified. All thirty-eight (38) patients received medical treatment. Early medical treatment reduces psychiatric relapses.

Communicable Disease Control

Program Description

The Public Health Division executes state of Wisconsin mandates to control local communicable diseases through surveillance, prevention and implementation of control measures. Foodborne outbreaks are controlled through integrated services with the Department of Environmental Resources. Occupational Safety and Health Act (OSHA) standards are interpreted and carried out to control blood borne pathogens and Hepatitis B and C in the County. The mandated 80 national reportable communicable diseases are routinely followed up and controlled. Public Health Disease Prevention Clinics are provided to control the vaccine preventable childhood communicable diseases along with providing health-screening activities to all age groups, health education counseling and referral. Pneumovax and flu vaccines are provided to children and adults in Waukesha County. International traveler education and immunization against communicable diseases is also offered to residents of Waukesha County.



Performance Measures	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Immunization Levels:					
The number of 2 year old children immunized by the Public Health Division (PHD).	276	324	* 265	260	(64)
The % of 2 year old children immunized by the PHD who have completed age appropriate immunizations will increase by 2% until 90% are fully immunized by age 2.	225	259	219	221	(38)
	81%	80%	83%	85%	5%
No. of communicable disease reports	576	570	592	570	0
No. of communicable diseases investigated	559	550	572	550	0
No. of requiring isolation to prevent transmission to public at time of report	33	30	46	30	0

*Reduction in the numbers is due to a higher number of children enrolled in the state's BadgerCare program which provides access to immunizations.

Staffing (FTE)	14.47	13.41	13.41	13.16	(0.25)
Personnel Costs	\$726,973	\$762,813	\$673,165	\$764,528	\$1,715
Operating Expenses	\$88,088	\$79,138	\$74,752	\$79,093	(\$45)
Interdept. Charges	\$20,023	\$49,202	\$39,202	\$48,038	(\$1,164)
Total Expenditures:	\$835,084	\$891,153	\$787,119	\$891,659	\$506
General Government	\$55,576	\$75,766	\$39,039	\$62,800	(\$12,966)
Charges for Services	\$127,403	\$144,827	\$113,038	\$145,860	\$1,033
Interdepartmental	\$2,823	\$2,278	\$1,279	\$2,190	(\$88)
Total Revenues:	\$185,802	\$222,871	\$153,356	\$210,850	(\$12,021)
Tax Levy	\$649,282	\$668,282	\$633,763	\$680,809	\$12,527

Communicable Disease Control (cont.)



Program Highlights

Personnel costs are increased due to general wage and employee benefit cost increases. Additional changes include a \$14,500 reduction due to unfunding of a 0.26 FTE for the Public Health Nurse II resulting from changes in the Immunization grant objectives, the transfer of \$2,100 for 0.06 FTE Public Health Technician from Administration and a reduction of \$1,706 for 0.05 FTE Registered Professional Nurse – Extra Help. Operating expenses are decreased slightly. Interdepartmental charges reflect a decrease in the end user technology fee charges for computer support.

General government revenue is decreasing by \$12,966 due to the discontinuation of the Supplemental Immunization Grant. Charges for services revenue is budgeted to increase based on an increase in the number of Influenza Immunizations and a \$2 or 11% fee increase.



Activity

The Public Health Division is responding to new emerging communicable diseases arriving in the Western Hemisphere. In the first quarter of 2003, the Division responded to Severe Acute Respiratory Syndrome (SARS) and the multi-state Monkeypox outbreak. Suspect Monkeypox cases were isolated and laboratory tested, and their human and animal contacts were monitored for illness. Disease control measures were implemented. An emergency smallpox vaccination clinic was conducted in the county for contacts to cases of Monkeypox. The Monkeypox outbreak was 100% contained in an efficient and timely manner.

Sexually Transmitted Diseases

Program Description

The Sexually Transmitted Disease (STD) Program is designed to identify, track and contain the spread of preventable sexually transmitted diseases. Public Health Services are provided to family physicians regarding current treatment schedules and are notified of incidence and prevalence rates of STD's in Waukesha County. STD clinics are available for assessment, treatment and counseling. Partner notification of exposure to an STD is provided. Anonymous HIV testing is made available to identify HIV infections. Persons with AIDS disease are followed up for disease control, education and linking to resources.



Performance Measures

Number of STD Infections in 2004 (Based on 2002 Actuals)

80% of STD infected clients identified at the Public Health Clinic that can be treated by the clinic, will be treated to control spread of Sexually Transmitted Diseases. Clients may require more than one treatment.

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Number of STD Infections in 2004 (Based on 2002 Actuals)	101	130	80	100	(30)
80% of STD infected clients identified at the Public Health Clinic that can be treated by the clinic, will be treated to control spread of Sexually Transmitted Diseases. Clients may require more than one treatment.	80 (80%)	104 (80%)	64 (80%)	80 (80%)	(24) 0%

Staffing (FTE)

2.10

2.05

2.05

2.05

0.00

Personnel Costs	\$109,891	\$117,155	\$102,622	\$122,798	\$5,643
Operating Expenses	\$20,397	\$21,239	\$25,184	\$21,452	\$213
Interdept. Charges	\$340	\$6,855	\$4,561	\$4,994	(\$1,861)
Total Expenditures:	\$130,628	\$145,249	\$132,367	\$149,244	\$3,995
Charges for Services	\$9,716	\$11,544	\$5,280	\$11,500	(\$44)
Total Revenues:	\$9,716	\$11,544	\$5,280	\$11,500	(\$44)
Tax Levy	\$120,912	\$133,705	\$127,087	\$137,744	\$4,039



Program Highlights

Personnel costs primarily reflect general wage and employee benefit cost increases. Operating expenses are slightly increased. Interdepartmental charges are budgeted to decrease due to lower End User technology fund charges for computer support. Charges for services revenues are expected to remain at about the 2003 level.



Activity

	2002 <u>Actual</u>	2003 <u>Budget</u>	2003 <u>Estimate</u>	2004 <u>Budget</u>	Budget <u>Change</u>
STD Clinic Screening Project:					
Individuals screened	481	* 575	500	525	(50)
Continued intervention	245	250	230	240	(10)
STD Investigations	393	350	350	350	0
HIV Screenings	292	* 350	308	325	(25)
HIV Investigations	17	15	15	15	0
AIDS New Cases Reported	5	4	4	4	0
AIDS Cumulative Cases reported from 1982 through year end.	124	128	132	132	4

*The numbers for STD and HIV individuals screened reflect a decrease in population in the 25-34 year old age group based on the 2000 U.S. census for the County.

Community Health and Disease Surveillance

Program Description

The Community Health and Disease Surveillance Program (CHDS) is responsible for the monitoring of the incidence and prevalence rates of emerging County-wide public health problems, preventable chronic diseases, communicable diseases, and environmental disease related issues. This program provides statistical research, analysis and evaluation to the County Health Report Card and carries out community requested studies of diseases impacting a specific locale. This program recommends public health interventions to control or contain county diseases and/or identified public health problems effecting aggregate populations. This program is responsible for public health workforce development in maintaining and introducing new clinical skills.



Performance Measures

	2002 Actual	2003 Budget	2003 Estimate	2004 Budget	Budget Change
Percentage of the Public Health professional workforce that will receive formal training in Bioterrorism response.	10%	30%	30%	40%	10%
Staffing (FTE)	5.00	5.00	5.00	5.00	0.00

Personnel Costs	\$260,290	\$321,103	\$260,982	\$330,001	\$8,898
Operating Expenses	\$41,184	\$9,442	\$62,262	\$130,608	\$121,166
Interdept. Charges	\$2,863	\$22,030	\$23,382	\$22,560	\$530
Total Expenditures:	\$304,337	\$352,575	\$346,626	\$483,169	\$130,594
General Government	\$34,085	\$0	\$55,729	\$123,822	\$123,822
Interdepartmental	\$0	\$0	\$1,800	\$0	\$0
Total Revenues:	\$34,085	\$0	\$57,529	\$123,822	\$123,822
Tax Levy	\$270,252	\$352,575	\$289,097	\$359,347	\$6,772



Program Highlights

Personnel costs reflect general wage and employee benefit cost increases along with the establishment of 1.0 FTE Epidemiologist and the abolishment of 1.0 FTE Programs & Projects Analyst. Budgeted operating expenses increase primarily due to increases in the Public Health Preparedness Grant for the preparedness planning and education of Public Health division's personnel.

General government revenues for 2004 are expected to increase due to a \$123,822 increase in the Bioterrorism Preparedness Grant funding. The 2003 estimate includes \$55,729 of the Bioterrorism grant funding.



Activity

Significant epidemiological surveillance and disease tracking is highlighted as a result of the monkeypox outbreak. Epidemiological daily maintenance of Monkeypox outbreak line listings, data tracking and analysis was maintained for Waukesha County and the Milwaukee/Waukesha Regional Consortium to create daily epidemiological curves to identify the increase in the epidemic. Surveillance information was disseminated to the local health care providers and veterinary clinics over the EMSsystem, blast fax, email system and Health Alert Network.